

STANDARD FORM 66
October 1966
FLOWERED BY U. S. CIVIL SERVICE COMMISSION
Federal Personnel Manual B-4
5010-101

SECRET

Official Personnel Folder

SECRET, 7

RETURN TO: PERSONNEL & RECORDS CENTER
IMMEDIATELY AFTER USE
JOB 70-374 BOX 23

448919

6 2 JUL 1966

NOEL, JAMES A.

QUALIFICATIONS

term
8-3-68
70-374
A-23

21 May

Mr. James A. Noel
2057 Flying Hills Lane
El Cajon, California 92020

Dear Mr. Noel:

I am very pleased to forward to you your Letter of Commendation from Mr. Helms and your Certificate of Retirement.

Your service medallion has been ordered and, of course, will be sent to you as soon as it is received from the engraver. You should have it in approximately ten weeks.

Sincerely,

F. W. M. Jannoy
Director of Personnel

Enclosures
Distribution:

0 - Addressee

1 - OPF

1 - D/Pers

1 - ROB Soft File

1 - ROB Reader

CIA Letterhead

OP/RAD/ROB/ gln 14 May 1975

FILE 5706

Post Office Box 1925
Washington, D. C. 20013

26

Mr. James A. Neel
2057 Flying Hills Lane
El Cajon, California 92020

Dear Mr. Neel:

I am responding to your letter of 27 November addressed to
Mr. John F. Blake, former Director of Personnel.

Your request that your Certificate of Retirement and your
Letter of Commendation from the Director be released to you was
given very careful consideration. I am most sorry to advise that
circumstances still prevail which preclude their release.

Sincerely,

F. W. M. Janney
Director of Personnel

Distribution:
0 - Addressee
1 - D/Pers
1 - OPF
1 - ROB Soft File
1 - ROB Reader

OP/RAD/ROB/ [] 18 December 1973)

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM					
UNCLASSIFIED		CONFIDENTIAL		SECRET	
OFFICIAL ROUTING SLIP					
TO	NAME AND ADDRESS	DATE	INITIALS		
1	CCS/CSB Mr. Biladeau CH-44 Hqs	7 Dec	RB		
2					
3					
4	ROB/Cleaner				
5	205 Magazine				
6					
ACTION		DIRECT REPLY		PREPARE REPLY	
APPROVAL		DISPATCH		RECOMMENDATION	
COMMENT		FILE		RETURN	
CONCURRENCE		INFORMATION		SIGNATURE	
Remarks:					
<p>Dick:</p> <p>Would you please take another look at this one to see if we might now release letter and certificate.</p>					
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>					
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
FOLD HERE TO RETURN TO SENDER					
FROM: NAME, ADDRESS AND PHONE NO.				DATE	
ROB, 205 Magazine, x2847				12/5/73	
UNCLASSIFIED		CONFIDENTIAL		SECRET	

2057 Flying Hills Lane
El Cajon, Calif., 92020

November 27, 1973

Mr. John F. Blake
Director of Personnel
Central Intelligence Agency
Washington, D.C., 20505

Dear Mr. Blake:

I am writing to you personally and directly at the suggestion of my old friend and new neighbor, Don Marelius.

As the records will show I retired in the spring of 1971 after 40 years of Federal service 27 of which were with the Agency and predecessor organizations. At the time of my retirement a small ceremony was held, presided over by Mr. Tom K., and I was shown various items attesting to my length of service, dedication to duty, etc. However, I was not permitted to take these items with me due to certain considerations which I admit have never been quite clear to me. I was told informally in the division that perhaps after a year the items would be forwarded to me. It will soon be three years and I have not yet received them.

I am sure I don't need to tell you how much these items mean to me and what they will mean to my sons in later years. Therefore I would appreciate hearing from you as to the status of these items. I am sure there are many other fellows in the same boat.

Anxiously awaiting your reply, I am

Sincerely,



James A. Noel

DISPATCH		CLASSIFICATION S E C R E T	PROCESSING ACTION
TO Chief, [REDACTED]		X	<input type="checkbox"/> MARKED FOR INDEXING <input checked="" type="checkbox"/> NO INDEXING REQUIRED <input type="checkbox"/> ONLY QUALIFIED DESK CAN JUDGE INDEXING <input type="checkbox"/> MICROFILM
INFO			
FROM Chief of Base, Los Angeles			
SUBJECT ISOLOG/ADMIN - Retirement Letter & Certificate - [REDACTED]			
ACTION REQUIRED - REFERENCES			
Action: For your retention Ref: USLS-416, dated 8 November 1971 Forwarded under separate cover is the retirement letter and certificate of [REDACTED] as seen these documents and they are being returned per Reference instructions. <div style="border: 1px solid black; height: 40px; width: 200px; margin: 20px auto;"></div>			
Attachment: Letter & Certificate u/s/c Distribution: 3-C, [REDACTED] w/att u/s/c			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER USLT-431	DATE 21 March 1972	
	CLASSIFICATION S E C R E T	FILE NUMBER	

August 25, 1971

Dear Tom -

I am taking advantage of Gene's coming visit to Washington to send you this little note.

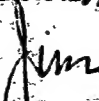
We will be moving to the San Diego area the end of this month and hoped to be settled into our new home there by the time mid-September rolls around.

Tom, you will recall that at the time of my retirement you presented me with a letter from Dick, a certificate of service, and (I understood) a silver medallion. All of these items were then returned to be safely stored away until some future date - not specified. I am sure you can appreciate that these items mean an awful lot to me - and eventually will mean a lot to my two sons. I realize and appreciate the need, [redacted] for discretion with respect to displaying these items to friends, etc. At the same time I realize that as the years pass the chances of these items getting "lost" or falling between the chairs back home is very good. I do not want to lose them and it goes without saying that I would honor any restrictions that might be imposed in the event they are sent to me. The outfit in past years has entrusted me with top secrets, with the management of unvouchered funds, with details of sensitive operations. Surely it can now trust me to use intelligent discretion in the safeguarding of these items I write about. I would appreciate it Tom if you would take this request into careful consideration.

When I saw you last in Washington you promised one day you would be making a trip out to San Diego. I am holding you to that and hope it will be soon.

Lillian joins me in sending you our warmest regards. Don't forget - wherever I am you and the outfit have a sincere friend who is prepared to help out to the best of his ability.

Sincerely,



James A. Noel

14-00000

SECRET

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14 September 1971

MEMORANDUM FOR: SA/ADDP

SUBJECT: Mr. James A. Noel

1. Mr. James Noel was




ERICH W. ISENSTEAD
Chief, Central Cover Staff

SECRET

71-15477
20 MAR 1971

Mr. James A. Noel
1807 Sebastian Drive
Burlingame, California 94010

Dear Jim:

As you reach the end of your active career of Government service, I want to join your friends and colleagues in wishing you continued success and satisfaction in your retirement.

You have been privileged to face the challenge of important responsibilities during your more than forty years of service to your country. The success with which you have met this challenge should be a source of lasting pride and satisfaction to you.

May I extend to you, personally and officially, my sincere appreciation for the important work you have done and my warmest hopes that you will find full enjoyment in the years ahead.

Sincerely,

Richard Helma

Richard Helma
Director

Distribution:

- O - Addressee
- 1 - DDCI
- 1 - ER
- 1 - C/EAB/OS
- 1 - D/Pers
- 1 - OPF
- 1 - ROB
- 1 - ROB Reader

Originator:

19 MAR 1971
Harry B. Fisher
Director of Personnel

Telephone Concurrence

*Concur:

16 March 1971
C/EAB/OS

OP/RAD/ROE/ERanochak:sl (16 March 1971)

* May be shown to Subject but must be retained in Agency files.

TR SMITTAL SLIP		DATE 22 May 1970
TO: QP/TRB - <input type="text"/>		
ROOM NO. 5 E 13	BUILDING Hqs	
REMARKS.		
<p>Would you be able to get the prior Federal Service file on this fellow. He's now a Career Agent with DOD and making retirement plans.</p> <p>JAMES A NOEL 055292 SSN 083-36 2388</p> <p>5/23/70 Request sent to Fed. R/C. File 7/14/70 Request sent to state. Then CCS. AT</p> <p>7/17/70 R/C searching 953 file for State Dept. file. AT</p> <p>9/18/70 - Per P.S. (R/C) are in file and file for 31-500 (at) [unclear]</p>		
FROM: RAD/ROB: <input type="text"/>		
ROOM NO. 205	BUILDING Magazine	EXTENSION 3251

FORM NO. 241
1 FEB 65REPLACES FORM D-8
WHICH MAY BE USED

(6)

UNITED STATES CIVIL SERVICE COMMISSION
WASHINGTON, D. C. 20415

FIR

REQUEST FOR OFFICIAL FILES

TO: National Personnel Records Center General Services Administration 111 Winnebago Street St. Louis, Missouri 63118	DATE	25 MAY 1970	6-5-70
	FILE	SSN: 083-36-2388	
	NAME	N-400 NOEL, JAMES A.	
	DATE OF BIRTH	19 MARCH 1911	

Please furnish the following material, needed by the Commission for the purpose shown below. The bottom part of this form is for your use as a transmittal. This material will be returned to you as soon as it has served its purpose. Any material classified under E. O. 10501 should be safeguarded and transmitted in accordance with the requirements of that order.

MATERIAL REQUESTED:

- ☒ Official Personnel File
- ☐ Abstract of Federal Employment from Official Personnel File
- ☐ Copies of any interviews held
- ☐ Copies of interrogatories and replies
- ☐ All copies of FBI reports of investigation (if you no longer employ this person, these reports will not be returned - See EPM Chapter 736, Subchapter 5.)

PURPOSE:

- ☐ Request for consideration under C.S. Regulation 731.401
- ☐ Request for consideration under C.S. Regulation 732.401
- ☐ To answer Congressional or other correspondence
- ☐ For use in considering pending application for examination
- ☒ Special Request
Chief, Division of Adjudication and Appraisal

☒ [Redacted Box]

on, Director
sonnel Investigations

TO: Division of Adjudication and Appraisal
Bureau of Personnel Investigations
U. S. Civil Service Commission
Washington, D. C. 20415

The material indicated below is attached as requested.

- ☐ Official Personnel File
- ☐ Abstract of Federal Employment
- ☐ Copies of any interviews held
- ☐ Copies of interrogatories and replies
- ☐ All copies of FBI reports of investigation

REMARKS:

[Redacted Box]

6-18-70

DATE 25 MAY 1970	SIGNATURE	OFFICIAL TITLE PERSONNEL
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00000

SECRET

27 April 1970

MEMORANDUM FOR: Chief, Retirement Affairs Division

SUBJECT: Mr. James A. Noel

REFERENCE: Dispatch - USFT-1584, 19 March 1970

1. Attached is a copy of a dispatch from subject, now a career agent - in which he poses certain questions with respect to his retirement status.

2. Since subject's retirement plans are directly involved with the service claimed, it would be appreciated if his records could be checked. Perhaps the Records Center could be checked.

(signed) Virginia C. Lynch
Virginia C. Lynch
Chief, DO Personnel & Training

Attachment: As Stated

SECRET

DISPATCH

CLASSIFICATION
S E C R E T

TO: Chief, [REDACTED]

INFO:

FROM:

Chief of Base, San Francisco

SUBJECT:

ISGOLD/LEAVE

Retirement Plans - [REDACTED]

ACTION REQUIRED - REFERENCES

PRIORITY

PRIORITY

NO PRIORITY FOR AIR

ONLY OFFICIALS CAN RECLASSIFY

EXCERPTS

REF: US273-860, 26 February 1970

1. Reference has been seen and noted by [REDACTED] and Headquarters' offer to assist him in programming his retirement is greatly appreciated.

2. There is a matter in which Headquarters could be of assistance and which, conceivably, could influence a decision on the part of [REDACTED] to retire before he reaches his 60th birthday in March 1971. It is this. When [REDACTED] resigned from ISGOLD on 15 August 1954, to accept employment on 18 August 1954, with MOHIV, he had to his credit with ISGOLD a considerable amount of annual and sick leave accrued over a period of about fourteen years. Due to regulations or practices in effect at that time he was not paid for his annual leave but was told that both his annual and sick leave balances would be held in escrow and if he returned to ISGOLD employment in the future the credits would be reinstated. Years later when [REDACTED] was being integrated into ISGOLD, he had a conversation with [REDACTED] and [REDACTED] leave credits and was informed by the ISGOLD official handling the integration papers that reinstatement of his leave could not be granted due to the fact that there had been a "break in the continuity of [REDACTED]'s government."

...Continued...

Distribution:

CROSS REFERENCE TO

DISPATCH SYMBOL AND NUMBER

USPT-1534

DATE

19 March 1970

CLASSIFICATION

S E C R E T

FILE NUMBER

CONTINUATION OF
DISPATCH

SECRET

service" as reflected by the papers submitted by Headquarters to LINGOLD in connection with the information process.

[REDACTED] has been in continual government service from 20 January 1931 to date without a single day's break in service, as his personnel record will disclose. He realizes, of course, that he has long lost his annual leave credit with LINGOLD and the lost annual leave is therefore not a matter of contention at this writing. However, he is most interested in now ascertaining whether the sick leave which he had to his credit when he resigned from LINGOLD in 1944 can be recovered and added to his sick leave balance now being held by LINGOLD. Since unused sick leave can now be used in computing longevity for retirement purposes, the recovery of this sick leave could play an important part in [REDACTED] retirement plans. Consequently, he would greatly appreciate it if the appropriate Headquarters officials would look into this matter at their earliest convenience.

3. [REDACTED] would also like to raise another matter relating to his service with LINGOLD. [REDACTED] served from October 1933 to July 1941 at Mazatlan, Mexico, which was then designated by the LINGOLD as an "unhealthy post" for retirement purposes. Each year of duty at an unhealthy post entitled the employee to one and one half years of credit for retirement purposes. [REDACTED] would appreciate learning whether his service at Mazatlan during the period mentioned would, under present rules, entitle him to extra retirement credit.

4. A ruling by Headquarters on the two points raised is respectfully requested.

William G. BOLAND

Originated by [REDACTED]

SECRET

Do Not Filled In

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL JAMES A ✓			
3. NATURE OF PERSONNEL ACTION RESIGNATION			4. EFFECTIVE DATE REQUESTED MONTH 08 DAY 03 YEAR 68		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS ▶	V TO V OF TO V	V TO OF XX OF TO OF	7. FINANCIAL ANALYSIS NO. CHARGEABLE 9129-0256		8. (LEGAL AUTHORITY (Completed by Office of Personnel))
9. ORGANIZATIONAL DESIGNATIONS DDP/DOD US FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE			10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIF.		
11. POSITION TITLE CHIEF OF BASE			12. POSITION NUMBER 0150	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, FS, AF)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP		17. SALARY OR RATE
GS		0136.08	16 6		3 26,640 ✓
18. REMARKS Subject is reemployable. 1815 H. ST. N.W. WASH., D.C.					
18A. SIGNATURE OF REQUESTING OFFICER <i>Virginia C. Lynch</i> Virginia C. Lynch, C/DO Pers. & Training		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>HB Fisher</i>	
				DATE SIGNED 3 Aug 68	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 43	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTELLIGENCE CODE	24. HQ/RTS CODE 2
25. DATE OF BIRTH MO. 03 DA. 19 YR. 41		26. DATE OF GRADE MO. 1 DA. 1 YR. 68		27. DATE OF LEI MO. 1 DA. 1 YR. 68	
28. DATE EXPIRES MO. 1 DA. 1 YR. 68	29. SPECIAL REFERENCE 1-CYC 2-ORGN 3-FLC 4-NONE	30. RETIREMENT DATA CODE 1	31. SEPARATION DATA CODE 6L 00 7 1	32. CORRELATION CANCELLATION DATA TYPE 1	33. SECURITY REQ NO. EOD DATA →
35. PAY PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO. 1 DA. 1 YR. 68	37. LONG. COMP. DATE MO. 1 DA. 1 YR. 68	38. CAREER CATEGORY CODE 1	39. REG./HEALTH INSURANCE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO.
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO GOVERNMENT SERVICE 2-SERIAL IN SERVICE (LESS THAN 3 YEARS) 3-SERIAL IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA NO. TAX EXEMPTIONS		44. STATE TAX DATA NO. TAX STATE CODE
45. POSITION CONTROL CERTIFICATION <i>HB Fisher</i>			46. OP APPROVAL <i>HB Fisher</i>		DATE APPROVED 6 AUG. 68

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE 03 August (Date) FOR THE FOLLOWING REASON.*Just in*

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

see attached

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

1815 H. St. NW
Washington DC

INSTRUCTIONS

Items 1, thru 7
and
Items 9 thru 18aThe initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular
Part Time
Temporary
Temporary-Part TimeSummer
Detail Out
Detail InWAE
Consultant
MilitaryPERSONAL AFFAIRS
BRANCH
Aug 8 11 AM '68
OFFICE OF
PERSONNELItem 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:MAJOR COMPONENT (Director, Deputy Director, etc.)
Office, Major Staff, etc.
Foreign Field or U.S. Field (if pertinent)
Division or Staff (subordinate to first line)
Branch
Section
Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the *gaining* Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING— The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET

SECRET

(If New Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1 SERIAL NUMBER 055292										2 NAME (Last-First-Middle) NOEL, JAMES A.	
3 NATURE OF PERSONNEL ACTION REMOVAL FROM CIA RETIREMENT AND DISABILITY SYSTEM - VOLUNTARY						4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 05 68		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS V TO V C TO V		V TO C C TO C		7 FINANCIAL ANALYSIS NO CHARGEABLE 8129-0256		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203					
9 ORGANIZATIONAL DESIGNATIONS DDP/DOD						10 LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA					
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D					
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 16		17 SALARY OR RATE 5					
18 REMARKS											
18A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGRAL CODE	24. MONTHS CODE	25. DATE OF BIRTH MO. DA. YR.		26. DATE OF GRADE MO. DA. YR.		27. DATE OF LEI MO. DA. YR.
28. HTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-YES 2-NO 3-SEMI 4-NONE		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO.		34. SEX		
35. VET. PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV. COMP. DATE MO. DA. YR.		37. LONG COMP. DATE MO. DA. YR.		38. CAREER CATEGORY CAR. RES. PROV. TEMP.	39. FEGLI HEALTH INSURANCE CODE 0-WRITER 1-YES		40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE EXEMP. 1-YES 2-NO				
45. POSITION CONTROL CERTIFICATION						46. OF APPROVAL Robert J. Hauto		DATE APPROVED 23 APR 68			

FORM 1152 USE PREVIOUS EDITION.

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 12 OCTOBER 1967	
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL JAMES A.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 08 67		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V C TO V		V TO C C TO C		7. FINANCIAL ANALYSIS NO CHARGEABLE 8129-0256		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE				10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA			
11. POSITION TITLE CHIEF OF BASE (GS-00)				12. POSITION NUMBER 0150		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.08		16. GRADE AND STEP 16 6		17. SALARY OR RATE \$ 23425	
18. REMARKS T/O Change. TRA							
18A. SIGNATURE OF REQUESTING OFFICIAL Virginia G. Lynch, C/DO Pers. & Training				DATE SIGNED 12 OCT 67		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul M. Lynch	
DATE SIGNED 16 OCT 67							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 39		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 43588 DOD		22. STATION CODE 72009	
23. INTEGRAL CODE 2		24. MONTHS CODE 03		25. DATE OF BIRTH MO DA YR 19 11		26. DATE OF GRADE MO DA YR	
27. DATE OF LES MO DA YR		28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE 1-ESC 2-FIL 3-NONE		30. RETIREMENT DATA CODE	
31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE MO DA YR		33. SECURITY REG. NO.		34. SEX	
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV. COMP. DATE MO DA YR		37. LONG. COMP. DATE MO DA YR		38. CAREER CATEGORY CAR. SERV. PROV. TEMP	
39. FEDERAL HEALTH INSURANCE CODE 0-WAIVED 1-YES		40. SOCIAL SECURITY NO.		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	
43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		45. POSITION CONTROL CERTIFICATION REL 10/20/67		46. O P APPROVAL P. M. Lynch	
47. DATE APPROVED 18 OCT 67							

FORM 1152
2-66 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

ADMINISTRATIVE
INTERNAL USE ONLY

27 APR 1967

MEMORANDUM FOR : James A. Noel

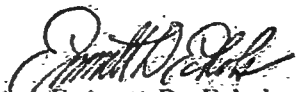
SUBJECT : Retirement Planning

1. As a participant in the CIA Retirement and Disability System, you will reach mandatory retirement at age 60. The prospect of retirement deserves serious thought and planning because of its impact on each of us and for this reason, we are taking this opportunity to provide you with this advance notice that according to our records you will be required to retire on March 1971.

2. Planning ahead can bring about, with each passing year, definite progress toward your retirement goals and the Agency is anxious to assist you in your retirement planning.

3. We would like to make available to you as much information as possible on the general subject of retirement, your annuity estimates, life and health insurance protection in retirement, opportunities for other employment, Social Security benefits, and other additional material which is available. The Agency feels that this type of information and advisory service should be made available and, hopefully, will be used by employees well in advance of the date of retirement.

4. Our Chief, Retirement Branch, on extension 3257, is available to discuss with you any aspect of your retirement planning and we encourage you to contact him.


Emmett D. Echols
Director of Personnel

ADMINISTRATIVE
INTERNAL USE ONLY

SECRET

DD FORM 138-2

DO 66-197

16 AUG 1966

MEMORANDUM FOR: Director of Central Intelligence

THROUGH : Deputy Director for Plans

SUBJECT : Appointment of Mr. James A. Noel as Chief
of Base, San Francisco, California

1. The appointment of Mr. James A. Noel as Chief of Base, San Francisco, California effective 6 September 1966 is recommended. Mr. Noel will replace [redacted]

2. Mr. Noel has been an employee of the Agency since 18 September 1947, and was previously assigned as Chief of Station, Madrid, Spain. A biographic profile, including information regarding his Agency experience and training, is attached.

C. Tracy Barnes
Chief, DO Division

1 Attachment
Biographic Profile (Parts 1 & 2)

APPROVAL RECOMMENDED:

W. K. Sullivan
Acting, Deputy Director for Plans

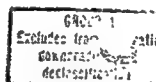
16 Aug. 66
Date

The recommendation in paragraph 1 is APPROVED:

Richard L. Helms
Director of Central Intelligence

17 Aug. 66
Date

SECRET



SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER 055202										2. NAME (Last-First-Middle) NOEL JAMES A	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT CORRECTION						4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 14 66		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGE 7129-0056		8. LEGAL AUTHORITY (Completed by Office of Personnel)		9. ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF		10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA			
11. POSITION TITLE CHIEF OF BASE				12. POSITION NUMBER 0150		13. CAREER/SERVICE DESIGNATION D		14. CLASSIFICATION SCHEDULE (GS, LB, HN)			
15. OCCUPATIONAL SERIES 0136.08				16. GRADE AND STEP 16 5		17. SALARY OR RATE 22,755		18. REMARKS Subject is being assigned to this position in accordance with UR 20-11-10 for a 1 year period. Comm. eff. date from: 08-10-66 to 08-14-66			
19. SIGNATURE OF REQUESTING OFFICIAL Virginia C. Lynch, ODO Pers. & Training				20. DATE SIGNED 12/16/66		21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. S. [Signature]					
22. DATE SIGNED 11/25/66				23. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
24. ACTION CODE		25. EMPLOY CODE		26. OTHER CODING NUMERIC ALPHABETIC		27. STATION CODE		28. INTEGRITY CODE			
29. DATE OF BIRTH MO. DA. YR.		30. DATE OF GRADE MO. DA. YR.		31. DATE OF LEI MO. DA. YR.		32. RETIREMENT DATA 1-YES 2-NO		33. SEPARATION DATA 1-YES 2-NO			
34. SPECIAL REFERENCE		35. RETIREMENT DATA 1-YES 2-NO		36. SEPARATION DATA 1-YES 2-NO		37. CORRECTION CANCELLATION DATA 1-YES 2-NO		38. SECURITY REQ. NO.			
39. YES PREFERENCE 1-YES 2-NO		40. SERV. COMP. DATE MO. DA. YR.		41. LONG. COMP. DATE MO. DA. YR.		42. CAREER CATEGORY 1-YES 2-NO		43. FEGLI/HEALTH INSURANCE 1-YES 2-NO			
44. SOCIAL SECURITY NO.		45. PREVIOUS GOVERNMENT SERVICE DATA 1-NO PREVIOUS SERVICE 2-NO BREAK IN SERVICE 3-BREAK IN SERVICE (LESS THAN 3 YEARS) 4-BREAK IN SERVICE (MORE THAN 3 YEARS)		46. LEAVE CAT. CODE		47. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		48. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS			
49. POSITION CONTROL CERTIFICATION 11-20-66 / 15				50. G.P. APPROVAL B. J. Bond				51. DATE APPROVED 29 Nov 66			

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL, JAMES A.		25 JULY 1966	
3. NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 13 66		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V <input type="checkbox"/> V TO C <input type="checkbox"/> C TO V <input type="checkbox"/> XXXX C TO C <input type="checkbox"/>		7. COST CENTER NO CHARGEABLE 7136-1347		8. LEGAL AUTHORITY (Complied by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP WE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF		10. LOCATION OF OFFICIAL STATION MADRID, SPAIN			
11. POSITION TITLE CHIEF OF STATION		12. POSITION NUMBER (16) 0399		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, 1B, etc.) GS		15. OCCUPATIONAL SERIES 0136.05		17. SALARY OR RATE 22735 \$ 22,735.	
16. GRADE AND STEP 16 5		18. REMARKS			
19A. SIGNATURE OF REQUESTING OFFICIAL <i>Richard F. Westerman</i> RICHARD F. WESTERMAN					
DATE SIGNED		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. H. King</i>		DATE SIGNED 27 JUL 66	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 56	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 50660 WL	22. STATUS CODE 67033	23. INTEGRITY CODE 3	24. MONTHS 03 19 11
25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LES MO. DA. YR.	28. DATE OF BIRTH MO. DA. YR.	29. DATE OF GRADE MO. DA. YR.	30. DATE OF LES MO. DA. YR.
31. NTE EXPIRES MO. DA. YR.	32. SPECIAL REFERENCE 1-EX 2-ITA 3-REAR	33. RETIREMENT DATA CODE	34. SEPARATION DATA CODE	35. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	36. SECURITY REQ NO
37. VET PREFERENCE CODE 0-BONE 1-5 PT 2-10 PT	38. SERV. COMP DATE MO. DA. YR.	39. LONG COMP DATE MO. DA. YR.	40. CAREER CATEGORY CODE 0-NO PREV 1-YES	41. LEGS/HEALTH INSURANCE CODE 0-NO 1-YES	42. SOCIAL SECURITY NO
43. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	44. LEAVE CAT. CODE	45. FEDERAL TAX DATA FORM EXECUTED CODE	46. STATE TAX DATA FORM EXECUTED CODE	47. STATE TAX DATA FORM EXECUTED CODE	48. STATE TAX DATA FORM EXECUTED CODE
49. POSITION CONTROL CERTIFICATION 7-2766 WL			50. APPROVAL 741 Bond 78 JUL 66		

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL JAMES A.			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 18-ASAP 66		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CP TO V X CP TO CP			7. COST CENTER NO. CHARGE 7129-0256		8. LEGAL AUTHORITY (Complied by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE <i>Office of the Chief</i>			10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIF.		
11. POSITION TITLE CHIEF OF BASE GS-00 (15)			12. POSITION NUMBER 0150		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G.S. F.B. No.) GS		15. OCCUPATIONAL SERIES 0336.08		16. GRADE AND STEP 16 5	
17. SALARY OR RATE \$ 22,005 2 2 76.5					
18. REMARKS Replacement - to be reassigned. Subject is being assigned to this position in accordance with HR 20-21c (2) for two years. From: DDP/WE/Madrid Station/Position No. 0399 Security Approval: Forwarded by Pers. SD/OS 8/3/66 Cc 8/10/66					
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Virginia C. Lynch</i> Virginia C. Lynch, C/DO Pers. & Training			18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. J. Long</i>		DATE SIGNED 8-8-66
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 43620 262	22. STATION CODE 75067	23. INTEGRITY CODE	24. JUDGES CODE 2031911
25. DATE OF BIRTH MO. DA. YR. 2 03 19 11	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LIA MO. DA. YR.	28. DATE OF GRADE MO. DA. YR.	29. DATE OF LIA MO. DA. YR.	30. DATE OF GRADE MO. DA. YR.
31. RET. EXPIRES MO. DA. YR.	32. SPECIAL REFERENCE 1-USE 2-FILE 3-NONE	33. RETIREMENT DATA CODE	34. SEPARATION DATA CODE	35. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	36. SECURITY PRO NO.
37. VET PREFERENCE CODE 0-NONE 1-5 YR 2-10 YR	38. SERV. COMP. DATE MO. DA. YR.	39. LONG. COMP. DATE MO. DA. YR.	40. CAREER CATEGORY CODE LAB/RESV PROV/TEMP	41. FEGLI/HEALTH INSURANCE CODE B-WAIVER 1-YES 2-NO	42. SOCIAL SECURITY NO.
43. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		44. LEAVE CAT. CODE	45. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	46. STATE TAX DATA CODE 1-YES 2-NO	47. STATE TAX DATA CODE 1-YES 2-NO
48. POSITION CONTROL CERTIFICATION <i>From WE</i> 8/4/66 all			49. O.P. APPROVAL <i>R. J. Long</i> 8/10/66 G. Long		

FORM 1152 USE PREVIOUS EDITION
9-63

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

23 March 1966

Koel, James Arthur
SS: 103-3-238

19 March 1911

U. S. State Dept.
Foreign Service
American Consulate
Guadaluajara, Mexico
26 Jan. 1931 To Aug. 1944

PERSONNEL

SECRET

29 MAR 65

MEMORANDUM FOR: Director of Personnel
THRU : DDP/OP
SUBJECT : PCS Return Prior to Completion of Tour
of Duty - James A. Noel
REFERENCE : CSN-20-59, dated 17 November 1965

1. This memorandum contains in paragraph 2 a recommendation for the approval of the Director of Personnel.

2. Mr. Noel arrived in Madrid as the Chief of Station on 21 September 1961. After home leave, he returned to Madrid on 7 August 1964, for a second tour of duty which would normally be completed on 6 August 1966. We have been advised that upon completion of his current assignment, Mr. Noel will be assigned as Chief of the DODS field office in San Francisco, California. Since the officer now filling that position is required to leave in early September for another assignment, it is very desirable that Mr. Noel arrive in San Francisco about 6 September. Therefore, it is requested that Mr. Noel be permitted to leave Madrid on or about 1 July 1966. This will permit him to take some home leave and arrive at his new post in sufficient time to settle his family, which includes two school age children, and report for his projected assignment on schedule.

Edward Ryan

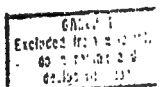
Edward Ryan
Acting Chief

Western Europe Division

Concur
James A. Miller
DDP/OP

Robert J. Hanks
AD/PERS
(over)

SECRET



SECRET

2

SUBJECT: PCS Return Prior to Completion of Tour of Duty -
James A. Noel

CONCUR:

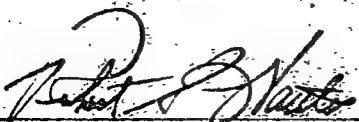
See Concurrence on Page 1

DDP/OP

22 April 1966

Date

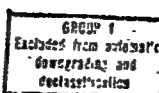
The recommendation in paragraph 2 is APPROVED:


Director of Personnel

26 APR 66

Date

SECRET



(M) Am filled to

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 3 Jan 66	
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL, JAMES A.					
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM						4. EFFECTIVE DATE REQUESTED MO DAY YEAR 01 16 66	
5. CATEGORY OF EMPLOYMENT REGULAR						6. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-443 Sect. 203	
7. CCAS CENTER NO CHARGE RBL		8. LOCATION OF OFFICIAL STATION MADRID, SPAIN				9. ORGANIZATIONAL DESIGNATIONS DDP/WE MADRID STATION OFFICE OF THE CHIEF	
10. POSITION TITLE CHIEF OF STATION		11. POSITION NUMBER 0399		12. CAREER SERVICE DESIGNATION 2		13. CLASSIFICATION SCHEDULE (GS, LB, etc.) FSR GS	
14. OCCUPATIONAL SERIES 0136.05		15. GRADE AND STEP 02 4 16 5		17. SALARY OR RATE \$22,511		18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.	
19. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i>		DATE SIGNED 5 JAN 1966		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 21		22. EMPLOY CODE 10		23. OFFICE CODING NUMERIC ALPHABETIC 10 50640 105 67035		24. STATION CODE 67035	
25. INTEGRITY CODE 2		26. DATE OF BIRTH MO DA YR 03 19 11		27. DATE OF DEATH MO DA YR 03 20 52		28. DATE OF LEI MO DA YR 10 10 65	
29. INT EXPIRES MO DA YR		30. SPECIAL REFERENCE 1-CR 2-FIR 3-NONE		31. RETIREMENT DATA CODE 2		32. SEPARATION DATA CODE EOD DATA	
33. PREFERENCE CODE 0-NONE 1-S, PL 2-10 PT		34. SERV. COMP. DATE MO DA YR		35. LONG. COMP. DATE MO DA YR		36. CAREER CATEGORY CAP: RES PROT/TEMP	
37. FEDERAL HEALTH INSURANCE CODE 0-WAIVER 1-TES		38. SOCIAL SECURITY NO. CODE		39. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO		40. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE		43. FEDERAL AS DATA FORM EXECUTED CODE 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	
45. POSITION CONTROL CERTIFICATION 01-07706 N				46. CP APPROVAL Bal Brndt Jr D New 5 Jan 66		DATE APPROVED	

SECRET

Chief of Station, Madrid

1

Director of Personnel

James H. Noel

WELBOGAGE ~~Notification of Designation as a Participant~~
in the Organization Retirement and Disability System.

Action: As indicated

REF: OSMS-2378

Reference dispatch informed you that the Director of Personnel has determined that you met the criteria specified in the applicable regulation for designation as a participant in the Organization Retirement and Disability System. On the basis of this determination and your recently executed election to remain in the System, your designation as a participant was made effective 16 January 1966.

/s/

[Redacted Signature]

21 JAN 66

[Redacted Initials]

87 JAN 66

OSMS - 2643

21 Jan 66

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

16 August 1961

1. SERIAL NUMBER

2. NAME (Last-First-Middle)

055292

NOEL JAMES A.

3. NATURE OF PERSONNEL ACTION

REASSIGNMENT

4. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR
08 20 61

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO CF

CF TO V

X CF TO CF

7. COST CENTER NO. CHARGEABLE

2136-6400-1017

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

DDP WE
MADRID STATION
OFFICE OF THE CHIEF

10. LOCATION OF OFFICIAL STATION

MADRID, SPAIN

11. POSITION TITLE

CHIEF OF STATION

D

12. POSITION NUMBER

003-399

12a. PCN CONTROL NO.

13. CAREER SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (OF, LD, SEC.)

FSR

00

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

03
16 01

17. SALARY OR RATE

13,600
15,255

18. REMARKS

DDP/WH/Dov Comp/Havana Cuba

COPY SENT TO SECURITY

I certify funds available:

CGR's Ref. No. MCR 2-007

Charge Ref. No. 236-6400-1017

Auth. Officer

Sawilly from POTS. 8/21/61

M4 9/7/61

Coordinated with Phil Bovee (phone) 8/21/61

ad 67

COPD

y8

19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

OFFICER

St. Leger

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

1. ACTION CODE 37	2. EMP CODE 10	3. OFFICE SYMBOL 62660	4. ALPHABETIC SYMBOL WE	5. STATION CODE 67633	6. MONTH CODE 3	7. DATE OF ACTION 03/19/61	8. DATE OF SET 03/19/61
9. NIE EMP REL NO. DA. PR.	10. SPECIAL DIFFERENCE 1 - SEC 2 - FICA 3 - WCAF	11. SET SYMBOL 1 - SEC 2 - FICA 3 - WCAF	12. SEPARATION DATA CODE 1 - YES 2 - NO	13. COLLECTION/RECEIPT ON JOB 1 - YES 2 - NO	14. SECURITY REL NO. 1 - YES 2 - NO	15. SECURITY REL NO. 1 - YES 2 - NO	16. SECURITY REL NO. 1 - YES 2 - NO
17. VET. PREFERENCE 1 - NONE 2 - 5 yrs 3 - 10 yrs	18. SIGN. COMP. DATE NO. DA. PR.	19. LTR. COMP. DATE NO. DA. PR.	20. MIL. SERV. COMP. DATE 1 - YES 2 - NO	21. REG. / MIL. / CIV. STATUS 1 - YES 2 - NO	22. SOCIAL SECURITY NO. 1 - YES 2 - NO	23. SOCIAL SECURITY NO. 1 - YES 2 - NO	24. SOCIAL SECURITY NO. 1 - YES 2 - NO
25. PREVIOUS EMPLOYMENT SERVICE DATA 1 - NO PREVIOUS SERVICE 2 - YES (IN SERVICE) 3 - YES (OUT OF SERVICE) 4 - YES (IN SERVICE) MORE THAN 12 MOS 5 - YES (OUT OF SERVICE) MORE THAN 12 MOS	26. MILITARY CODE 1 - YES 2 - NO	27. FEDERAL TAX DATA 1 - YES 2 - NO	28. STATE TAX DATA 1 - YES 2 - NO	29. TAX EXEMPTIONS 1 - YES 2 - NO	30. TAX EXEMPTIONS 1 - YES 2 - NO	31. TAX EXEMPTIONS 1 - YES 2 - NO	32. TAX EXEMPTIONS 1 - YES 2 - NO

33. POSITION CONTROL CERTIFICATION

34. C.P. APPROVAL

W. Keeney 8/20/61

D.C. Keeney
A. Leger
5 Sep 61
1 Aug 61

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 255272				2. NAME (Last-First-Middle) NOEL, JAMES A.	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH 07 DAY 23 YEAR 61		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE 2135-1990-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)
	CF TO V	X CF TO CF			
9. ORGANIZATIONAL DESIGNATIONS CS/CS DEVELOPMENT COMPLEMENT DDP/WH DIVISION			10. LOCATION OF OFFICIAL STATION * HAVANA, CUBA		
11. POSITION TITLE CHIEF OF STATION			12. POSITION NUMBER 9997	12A. PCR CONTROL NO.	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) FSR CS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 3 16 1		17. SALARY OR RATE 13600 15255
18. REMARKS (FROM: DDP/WH/Branch 4/PAP-114/Havana, Cuba) <i>try 9</i> 1 copy to Security Office. *Returnee Casual - pending approval of his appointment as Chief of Station, Madrid. <i>SPD covering 10/1/61 to 10/1/61</i> <i>W.K.</i>					
19. SIGNATURE OF REQUESTING OFFICIAL <i>P. C. Bowers</i> P. C. BOWERS WH/PERSONNEL OFFICER			20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>M. Lipp</i>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21. ACTION NO. EMPLOY. CODE	22. OFFICE LUDING	23. ACTION NO. EMPLOY. CODE	24. ACTION NO. EMPLOY. CODE	25. ACTION NO. EMPLOY. CODE	26. ACTION NO. EMPLOY. CODE
377 14	14977	14977	14977	14977	14977
27. ACTION NO. EMPLOY. CODE	28. ACTION NO. EMPLOY. CODE	29. ACTION NO. EMPLOY. CODE	30. ACTION NO. EMPLOY. CODE	31. ACTION NO. EMPLOY. CODE	32. ACTION NO. EMPLOY. CODE
377 14	14977	14977	14977	14977	14977
33. VET. PREFERENCE					
34. SER. COMP. DATE					
35. LEAF. COMP. DATE					
36. SOCIAL SECURITY NO.					
37. POSITION CONTROL CERTIFICATION					
38. O.P. APPROVAL					

SECRET

1-3683

16 June 1961

61-59241

MEMORANDUM FOR: Director of Central Intelligence

VIA : Deputy Director (Plans)

SUBJECT : Appointment of Mr. James A. Noel,
Chief of Station, Madrid, Spain

1. The appointment of Mr. Noel as Chief of Station, Madrid, Spain, effective on or about 15 September 1961, is recommended. Mr. Noel would replace Mr. Archibald B. Roosevelt, Jr. who is

2. Mr. Noel has been an employee of the Agency since 18 September 1947, and is presently assigned to WH Division. A biographic data sheet, including information regarding his Agency experience and training, is attached.

3. In view of the fact that Mr. Noel is not available for interview because he is on home leave the usual interview endorsement is not made a part of this memorandum.

Eric W. Timm
ERIC W. TIMM

Chief

Western Europe Division

1 Attachment
Biographic Information

APPROVAL RECOMMENDED:

Richard W. Russell Jr.
Deputy Director (Plans)

10 JUL 1961
(Date)

The recommendation in paragraph 1 is approved:

Allen Dulles
Director of Central Intelligence

11 AUG 1961
(Date)

SECRET

SECRET

16 June 1961

Name:
Grade:
Service Designation:

James A. Noel
GS-16
D

Date and Place of
Birth:

March 19, 1911
New York, New York

Marital Status:

Married
Wife: Lillian B. Noel
Son :
Son :

Education and Career
Outside the Agency:

1926 - 1929
1931 - 1944

San Diego Senior High School
Department of State
Ensenada, Mexico; Vice Consul
Mazatlan, Mexico; Vice Consul
Guadalajara, Mexico; Vice Consul
OSS/SSU/CIG
Spain and Guatemala; Chief of Station

1944 - 1947

Languages:

Spanish; Good

Military Duty:

None

CIA Experience:

Sep 1947
Mar 1949
Aug 1949
Aug 1951
Sep 1952
Aug 1954
Jan 1956
Jun - Jul 1956
Jun 1957
Apr 1958
Apr 1961

OSO/FBI/Guatemala; COS, GS-12
Promoted to GS-13
OSO/FBI/Buenos Aires; COS, GS-13
Promoted to GS-14
DDP/WH/Caracas; COS, GS-14
Promoted to GS-15
DDP/WH-1/Branch Chief, Headquarters
TDY - South America
DDP/WH-2/Branch Chief, Headquarters
DDP/WH/Havana; COS, GS-15
Promoted to GS-16

SECRET

SECRET

- 2 -

15 June 1961

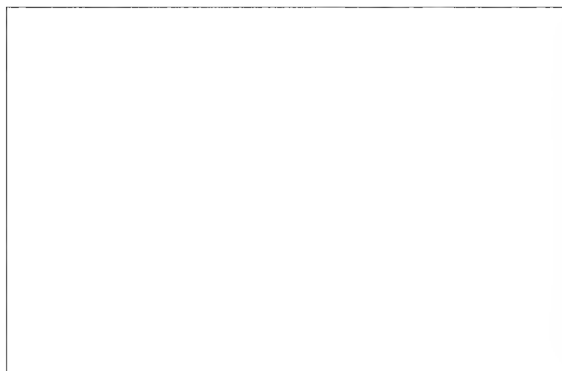
Name:

James A. Nool

CIA Training:

1947
1947
1947
1949

1949
1949
1949
1949
1949
1952
1952
1958
1958

**SECRET**

SECRET
(When Filled In)

V to V		V to UV		REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
UV to V		UV to UV						Mo	Da	Yr	
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth		4. Vol. Ref.		5. Sex	
		NOEL, James A.				Mo Da Yr 3 12 11		None-0 5 Pt-1 10 Pt-2		Code 0 M	
7. SCD		8. CSC Retire		9. CSC Or Other Legal Authority		10. Acmt. Affidav.		11. FEGLI		12. LCD	
Mo Da Yr		Yes - 1 No - 2				Mo Da Yr		Yes - 1 No - 2		Mo Da Yr	
										13. Credit Lcd	
										Yes - 1 No - 2	

CURRENT ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/WH Branch III Havana, Cuba Station						Havana, Cuba					
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. Usfid. Fragn.		CHIEF OF STATION		114		(PSS)		0136-01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
15 4		\$ 13,670		DI		Mo Da Yr 08 01 54		Mo Da Yr 07 12 65			

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
PROMOTION (TEMPORARY) *				Mo Da Yr 03 20 66		REGULAR					

PROPOSED ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
33. Dept. Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. Usfid. Fragn.											
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
16 1		\$ 14,190		DI		Mo Da Yr 07 20 66		Mo Da Yr 07 12 66		0155-5450-3000	

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)		Date Approved	
		Richard Helms			
B. For Additional Information Call (Name & Telephone Ext.)		Chief of Operations, DD/P			

CLEARANCES

Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board						D. Placement					
B. Pos. Control				3-10-66		E. Release					
C. Classification						F. Approved By				MAR 1966	

* Promotion to the grade indicated is temporary and for such duration as the Director will determine. Your permanent grade is the grade from which you are temporarily promoted.

☐ Continued on reverse side

SECRET

Classify Acco.
To Contain

REQUEST FOR PERSONNEL ACTION															
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CS - EOD		
		NOEL, James A.				Mo Da Yr 3 19 11			None-0 Code 5 Pt-1 10 Pt-2 0		M		Mo Da Yr		
7. SCD		8. CSC Reentr.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. Will Serve Cred. Lgo		
Mo Da Yr		Yes-1 No-2		Code 1		Mo Da Yr			Yes-1 No-2		Mo Da Yr		Yes-1 No-2		

PREVIOUS ASSIGNMENT

UNVOUCHERED

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/WH Branch II						Washington, D.C.					
16. Dept. - Field		17. Position Title		18. Position No.		19. Serial		20. Occup. Series			
Dept. - X Unfld. Frn. -		Area Ops Officer (Br Ch)		SA-160		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
15-3		\$ 12, 150		DI		Mo Da Yr		Mo Da Yr		B-3500-10-200	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
REASSIGNMENT		69		Mo Da Yr 4 16 15		REGULAR		OM			

PRESENT ASSIGNMENT

UNVOUCHERED

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP/WH Branch III Havana, Cuba Station				4652		Havana, Cuba				17085	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - X Unfld. Frn. -		Area Ops Officer (Br Ch)		SA-114		D		65			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
15-3		\$ 12, 150		DI		Mo Da Yr 08 10 15		Mo Da Yr 01 25 15		E-3545-55-055	
A. Requested By (Name And Title)						C. Request Approved By (Signature And Title)					
ROBERT S. WATLES C/WH/Support						Serving until 27 Feb 1958 FEB					
B. For Additional Information Call (Name & Telephone Ext.)											
JOHN WASHINKO X 8242											
CLEARANCES											
Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board		JP		3/18/58		D. Placement		F. Approved By		1 MAR	
B. Pos. Control						E.		ROBERT W. SHAW		1 MAR	
C. Classification						F.					
Remarks											
2 copies to Security.											
Sec. Conc. by Ratt 3/24 - 3/26											

FORM 1152a
5-57

SECRET

SECRET

REF ID: A69411

18-169411

12 February 1958

MEMORANDUM FOR: Director of Central Intelligence

VIA: Deputy Director (Plans)

SUBJECT: Appointment of Mr. James A. NOEL, Chief of Station, Havana, Cuba

1. The appointment of Mr. Noel as Chief of Station, Havana, Cuba, effective on or about 7 September 1958, is recommended. Mr. Noel would replace Mr. William B. Caldwell whose reassignment to another field station is under active consideration.

2. Mr. Noel has been an employee of the Agency since 15 August 1944, and is presently assigned as Chief of Branch II, WH Division, Headquarters, GS-15. A biographic data sheet, including information regarding his Agency experience and training, is attached.

J. C. King
J. C. KING
Chief
Western Hemisphere Division

1 Attachment
Biographic information

APPROVAL RECOMMENDED:

Mr. Noel has been interviewed by the Chief of Operations, and by myself, and we are satisfied that he is qualified for this assignment.

WPC
DDCI 1 MAR 1958

Frank Sullivan
Deputy Director (Plans)

5 March 1958
(Date)

The recommendation in paragraph 1 is APPROVED:

Chief of Operations
Director of Central Intelligence

10 MAR 1958
(Date)

SECRET

WHL

Jones

A.

12 November 57

Branch Chief

DDP/MH/II

08-15

ooo

ooo

TDY Stand-by Status

Subject is qualified for one (3 weeks) TDY. (11/25/57)
Must be evaluated for each TDY.

WHL/II

WHL/II S 00 11.25

WHL/II S 00 11.25

SECRET

S-E-C-R-E-T

This Notice Expires 1 July 1958

N 20-190-139

NOTICE
NO. 20-190-139

PERSONNEL
2 July 1957

ANNOUNCEMENT OF ASSIGNMENTS TO KEY POSITIONS

PANEL OF EXAMINERS OF THE CIA SELECTION BOARD

In accordance with paragraph 5b of Regulation No. 20-105, The Career Staff of the Central Intelligence Agency, the following persons are appointed, effective 1 July 1957, to serve as members of the Panel of Examiners for the period ending 30 June 1958:

<u>Name</u>	<u>Service Designation</u>	<u>Organizational Component</u>
	DP	DD
	IS	
	DI	
	DT	
	OD	
	SP	
	DT	
	IB	
	C	
	OC	
	DM	
	DI	
	SC	
	SL	
	DI	
	SF	
	SL	
	SM	
	DP	
	IB	
	C	
	SS	
	DI	
	IN	
	SS	
	D	

S-E-C-R-E-T

N 20-190-139

NOTICE
NO. 20-190-139

PERSONNEL
2 July 1957

<u>Name</u>	<u>Service Designation</u>	<u>Organizational Component</u>
[redacted]	DP	[redacted]
[redacted]	IC	
[redacted]	DI	
[redacted]	DI	
[redacted]	D	
[redacted]	IR	
[redacted]	SP	
[redacted]	SL	
[redacted]	DI	
[redacted]	SS	
[redacted]	SC	
[redacted]	IS	
[redacted]	OB	
[redacted]	DI	
Noel, James A.	DI	
[redacted]	SL	
[redacted]	SC	
[redacted]	DI	
[redacted]	DM	
[redacted]	SP	
[redacted]	SC	
[redacted]	IR	
[redacted]	ST	
[redacted]	ST	
[redacted]	SA	
[redacted]	DI	
[redacted]	SC	
[redacted]	DI	
[redacted]	IC	
[redacted]	SP	
Wattles, Robert S.	SA	

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE:

H. GATES LLOYD
Acting Deputy Director
(Support)

DISTRIBUTION: A, plus each member
of the Panel of Examiners

S-E-C-R-E-T

SECRET

STANDARD FORM 52 FORMERLY KNOWN AS THE U. S. CIVIL SERVICE COMMISSION PERSONNEL ACTION REQUEST FORM NAME, NUMBER, ETC.		UNVOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) Mr. James A. KUEL		2. DATE OF BIRTH 19 Mar 1911	
3. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		4. DATE OF REQUEST 17 May 57	
5. POSITION (Specify whether establish, change grade or title, etc.)		6. EFFECTIVE DATE A. PROPOSED:	
		7. C.S. OR OTHER LEGAL AUTHORITY	
8. APPROVED:			
FROM: (DC EN) Area Ops Officer (SS) EA-10 GS-0136.01-15 \$11,880.00 p.a. (FSS-3 \$9635.00 p.a.) DDP/WH Branch I Washington, D. C.		TO: (DC EN) 460 Area Ops Officer (SS) EA-10 GS-0136.01-15 \$11,230.00 p.a. (FSS-3 \$9635.00 p.a.) DDP/WH Branch II Washington, D. C.	
9. POSITION TITLE AND NUMBER		10. SERVICE GRADE AND SALARY	
11. ORGANIZATIONAL DESIGNATIONS		12. FIELD OR DEPARTMENTAL	
13. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/>		14. FIELD <input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/> (D)	
A. REMARKS (Use reverse if necessary) Memorandum forwarded to Management on 23 May 1957 requesting that position BA-51 be converted from Headquarters Vouchered to Headquarters Unvouchered.			
B. REQUESTED BY ROBERT S. JAMES C. (Telephone extension)		D. REQUEST APPROVED BY Signature: [Signature] Title: [Title] 10 JUNE 57	
13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WW <input type="checkbox"/> OTHER <input type="checkbox"/> SPT <input type="checkbox"/> 10 PART DISAB: OTHER		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> SD-DI	
15. 20X H FROM: 7-3500-10-200 TO: Same		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	
16. APPROPRIATION FROM: 7-3500-10-200 TO: Same		18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:			
20. STANDARD FORM 50 REMARKS			
21. CLEARANCES		REMARKS: approved by CUS/ADDP on 27 May 1957	
A.		12 JUN 1957	
B. CEIL. OR POS. CONTROL		14 June	
C. CLASSIFICATION:		10 JUNE 57	
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY J. W. Shear per J. E. Seay, Jr. 11 June 1957			

SECRET

STANDARD FORM 52 PREPARED BY THE U. S. ARMY OFFICE OF PERSONNEL ADJUTANT GENERAL WASHINGTON, D. C. 20315		REQUEST FOR PERSONNEL ACTION		UNVOUCHERED	
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.					
1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname) Mr. James A. NOEL		2. DATE OF BIRTH 19 March 1911		3. REQUEST NO. 	
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		5. EFFECTIVE DATE A. PROPOSED: 		6. DATE OF REQUEST 14 Dec 55	
B. POSITION (Specify whether establish, change grade or title, etc.) 		B. APPROVED: 29 Jan 1956		7. C. S. OR OTHER LEGAL AUTHORITY 	
FROM— Area Ops Officer (S.C.), BAF-93 GS-0136.01-15 \$11610.00 p.a. (FSS-3 \$8481.00 p.a.) DDP/WH Caracas, Venezuela <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		A. POSITION TITLE AND NUMBER B. SERVICE, GRADE, AND SALARY C. ORGANIZATIONAL DESIGNATIONS D. HEADQUARTERS E. FIELD OR DEPARTMENTAL		TO— Area Ops Officer (B. C.), BA-40 GS-0136.01-15 \$11610.00 p.a. (FSS-3 \$8481.00 p.a.) DDP/WH Branch I - NWC Washington, D. C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL (FP)	
8. REMARKS (Use reverse if necessary) <p style="text-align: center;">A memorandum has been forwarded to the Management Staff requesting that this position be converted from vouchered to unvouchered.</p>					
9. REQUESTED BY (Name and title) James P. Bowers C/WH		10. REQUEST APPROVED BY Approved by GS Career SD-DI			
11. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) P. C. BOWERS: X 4457		12. POSITION CLASSIFICATION ACTION NEW VICE 1 A. 1 CAL SD-DI			
13. VETERAN PREFERENCE NONE WWI OTHER 5 PT 10 POINT <input checked="" type="checkbox"/> DISAB. OTHER		14. SUBJECT TO C. S. REINSTATEMENT ACT (YES-NO) Yes			
15. DATE OF APPOINTMENT AFFIDAVIT (Accessions only) 		16. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:			
17. STANDARD FORM 10 REMARKS <p style="text-align: center;">Case by Elise 20 Jan 55 LR 1/24/56</p>					
18. CLEARANCES A. B. CEIL. OR POS CONTROL C. CLASSIFICATION D. PLACEMENT OR EMPL. E.		INITIAL OR SIGNATURE 1-2-56		DATE 23 JAN 1956	
F. APPROVED BY Approved by J. J. Caldwell 19 Jan. '56					

SECRET

26 May 1954

MEMORANDUM FOR: PERSONNEL OFFICER, FI

SUBJECT: NOEL, James A. -
Recommendation for Promotion

1. Mr. James A. Noel was born 19 March 1911, in New York City, is married and has two children. He graduated from San Diego Senior High School and entered the United States Foreign Service, where he served as consular officer in Mexico and Spain, from 1931 to 1944. He entered on duty with CIA, at CAF-11, on 15 August 1944. He served in Madrid and Barcelona and was promoted to CAF-12 in 1946. He subsequently served at Guatemala City as Chief of Station, and in March 1947, was promoted to GS-13. He was assigned to Buenos Aires as Chief of Station, and in August of 1951 was promoted to GS-14. Subject is presently Chief of Station at Caracas, Venezuela.

2. Mr. Noel has been rated Excellent to Outstanding as Chief of Station. His last efficiency report in June 1953 reflected a lower rating due to a difficult personnel situation and hospitalization. However, this situation has been resolved, and it is felt that Mr. Noel has earned his promotion to GS-15.

3. Your approval is requested.

J. Caldwell King
J. Caldwell King
Chief, WH

SECRET

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SECRET

21 January 1954

MEMORANDUM FOR: CWH

SUBJECT : Reference to James A. Noel by William I. Clark,
Assistant Director U.S.I.A. for Latin America.

During the briefing of CIA personnel conducted by William I. Clark, Assistant Director of U.S.I.A. for Latin America, on 14 January 1954, he made reference to the excellent cooperation between our Chief of Mission at Caracas, James A. Noel and the P.A.O., which he characterized as exemplary and a model for all other stations.

CWP/WH

Distribution:

Original and 1: Addressee

BRANCH
FEB 1 3 21 PM '54
PERSONNEL

SECRET

SECRET

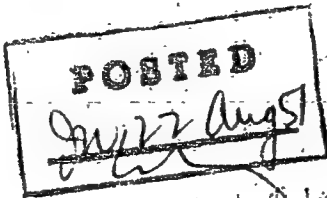
CONFIDENTIAL FUNDS PERSONNEL ACTION

12951

NAME		DATE
NATURE OF ACTION		EFFECTIVE DATE
HILL, James A.		12 March 1952
Reassignment		FROM
TO		27 April 1952
TITLE	Intell Off	Intell Off
GRADE AND SALARY	Chief of Station, GS-14	Chief of Station, GS-14
OFFICE	GS-14, \$9600.00 per annum	GS-14, \$9600.00 per annum
DIVISION	090	
BRANCH	INT	INT
OFFICIAL STATION	Branch I	
Buenos Aires, Argentina (73510)		Caracas, Venezuela (73529)
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS:		
#1.		
12 March 1952		

SECRET

mr+cFD

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME BOEL, James A.		DATE 16 July 1951
NATURE OF ACTION Promotion		15 August 1951
	FROM (Intelligence Officer)	
TITLE	Chief of Station, CS-13	Chief of Station, CS-11
GRADE AND SALARY	CS-13, \$7000.00 per annum	CS-11, \$6300.00 per annum
OFFICE	CSO	CSO
DIVISION	FLT	FLT
BRANCH	EC	EC
OFFICIAL STATION	Director Airmen, Air Station	Director Airmen, Air Station
QUALIFICATIONS	APPROVAL FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: Slot # 57.		
<div style="text-align: center;">  </div>		

SECRET

FROM: BUENOS AIRES ROUTINE
TO: SPECIAL OPERATIONS 22 DEC 49
ACTION: FDT (1-2) IN 12169
INFORMATION: ADSO (3-4), SED (5), CFD (6), COMMO (7-8), IID (9)

BUEN 818

TO: WASHF CITE: BUEN

RE: WASH 4980 (OUT 95043)

DEPARTED FOR URUGUAY 22 DECEMBER. IN CHARGE.

James Noel

SECRET

TOR: 1922Z 22 DEC 49

Copy No. 5

- C. To be able to plan my travel and leave, it is important that I know the approximate duration of TDY.
- D. Would it be possible to postpone the date of my arrival at my new post until 15 June? This would be a great convenience to me, and I would appreciate any consideration which Headquarters may be able to give to this request.



Chief of Station

Mr. Robert Cunningham.

-3-

16 February 1948.

close relation to the job he is doing. Since this job is directly concerned with national security and the national interest, and has been consistently well done, I believe that Mr. Noel can be said with sincerity to be an employee of unquestionable loyalty and integrity.

5. The same beliefs of the writer pertain to Mr. Noel's wife, whom I have met on many occasions and found to share his attitudes and feelings completely. She, too, is strongly interested in the work Mr. Noel is engaged in and has few, if any, outside interests. Their home life is happy and wholesome and their social activities appear strictly restricted to the business of the day.
6. In this respect, I believe that both Mr. Noel and his wife are, by training and personality, security-conscious people who are quite happy to devote themselves to the success of the career in intelligence which Mr. Noel has selected.

RECEIVED

RECEIVED 15 JS 48

RECEIVED

RECEIVED

Office Memorandum • UNITED STATES GOVERNMENT ①

TO : Miss K. Haller, X-2
FROM : OSS Draft Deferment Committee
SUBJECT:

DATE: 21 August 1945

The local Board has notified us as follows:

James Arthur Noel Class 2-A Eff. Aug. 1, 1945 until indefinitely

File

Office Memorandum • UNITED STATES GOVERNMENT

TO : Mr. William Sherwood
FROM : M. L. Brockdorff
SUBJECT: Mr. James Arthur Noel

DATE: 17 October 1944

(1)

This office is in receipt of advice from Mr. Noel's Local Board, dated 12 October 1944, that he has been classified II-A until 9 April 1945. The Local Board also stated that their records show that the registrant was never ordered for a pre-induction physical examination by that Board.

M. L. B.

M. L. Brockdorff
Administrative Assistant

SECRET

REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

H a n d l e W i t h C a r e

LIMITED OFFICIAL USE (When Completed) SECRET



CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency; retains one copy.)

OFFICER BEING RATED Chief, CAS <i>Noel, James A</i>		POST Madrid, Spain	
POSITION Chief, Liaison Section		GRADE FSR-2	AGENCY CAS
RATING PERIOD 9/4/64 to 10/31/65		DATE OF REPORT December 15, 1965	
SIGNATURE OF REPORTING OFFICER <i>Angier Biddle Duke</i>		TITLE Ambassador	
SIGNATURE OF REVIEWING OFFICER		TITLE	

EVALUATION OF PERFORMANCE	
<input checked="" type="checkbox"/> Outstanding <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	
II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, explain in detail below.)	
Has he seen this report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE COMMENTS	
(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)	
<p>Chief, CAS is one of the ablest members of my Country Team. He has a profound knowledge and understanding of the complex Spanish political scene, and scores of valuable contacts. I have a healthy respect for his judgment, and frequently seek his advice and counsel.</p> <p>He manages his staff effectively and enjoys their respect and confidence. Popular and well liked by his colleagues in the Embassy and the Spanish Government, Chief, CAS is an excellent representative of our Government.</p> <p>Chief, CAS is prudent and discreet, and I have complete confidence in him. He is a man of few words but when he expresses himself, he does so in a meaningful way.</p> <p>A gifted analyst with an incredibly deep grasp of the complicated Spanish mentality, Chief, CAS' assessment and opinions are highly valued by me and the members of my Country Team.</p> <p>Chief, CAS and his associates have been most cooperative at all times, and have provided me with excellent support. I regard their operation superior in every respect which is a compliment to Chief, CAS' skillful leadership and direction.</p> <p>Chief, CAS' wife is an attractive American lady who is an asset to her husband. She takes an active part in community affairs.</p>	

THIS DOCUMENT CONSISTS OF ONE PAGE. COPY NUMBER 1 OF TWO COPIES, SERIES A.

00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-236 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	055292	43	500	CF GS 16 6	\$24,477	\$26,640

SECRET

NOTIFICATION OF ESTABLISHMENT OF OFFICIAL COVER BACKSTOP		DATE 22 July 1966																								
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	ESTABLISHED FOR NOEL, James A.																								
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION																									
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) DOD																									
ATTN:	Personnel	FILE NO. 233																								
REF:	Verbal Request	ID CARD NO.																								
OFFICIAL COVER BACKSTOP ESTABLISHED POs, Evaluation Office (SAN FRANCISCO, CALIF)		EMPLOYEE NO.																								
KEEP ON TOP OF FILE WHILE COVER IN EFFECT																										
<input checked="" type="checkbox"/> Block Records: (OPR 20-800-11) a. Temporarily for _____ days, effective _____ b. Continuing, effective _____ EOD																										
<input checked="" type="checkbox"/> Submit Form 642 to change limitation category. (RHB 20-7)																										
<input checked="" type="checkbox"/> Ascertain that Army W-2 being issued. (HB 20-662-1)																										
<input checked="" type="checkbox"/> Submit Form 1322 _____ Page reflecting this cover. (R 240-250)																										
<input checked="" type="checkbox"/> Submit Form 1323 _____ Transfer of cover responsibility. (R 240-250)																										
<input type="checkbox"/> Remarks:																										
<input checked="" type="checkbox"/> Cover History <table border="0" style="margin-left: 20px;"> <tr> <td>1944-1947</td> <td>OSS/CIG</td> <td></td> </tr> <tr> <td>1947-1949</td> <td></td> <td>Guatemala</td> </tr> <tr> <td>1949-1951</td> <td></td> <td>Argentina</td> </tr> <tr> <td>1951-1955</td> <td></td> <td>Venezuela</td> </tr> <tr> <td>1956-1958</td> <td></td> <td>Hdqs</td> </tr> <tr> <td>1959-1961</td> <td></td> <td>Cuba</td> </tr> <tr> <td>1961-1961</td> <td></td> <td>Hdqs</td> </tr> <tr> <td>1961-1966</td> <td></td> <td>Madrid Spain</td> </tr> </table>			1944-1947	OSS/CIG		1947-1949		Guatemala	1949-1951		Argentina	1951-1955		Venezuela	1956-1958		Hdqs	1959-1961		Cuba	1961-1961		Hdqs	1961-1966		Madrid Spain
1944-1947	OSS/CIG																									
1947-1949		Guatemala																								
1949-1951		Argentina																								
1951-1955		Venezuela																								
1956-1958		Hdqs																								
1959-1961		Cuba																								
1961-1961		Hdqs																								
1961-1966		Madrid Spain																								
CD/nz																										
CHIEF, OFFICIAL COVER CCS																										
DISTRIBUTION: Copy 1-POD, Copy 2-Operating Component, Copy 3-OS D'OS, Copy 4-OL/TELSVC, Copy 5-PSD/OS, Copy 6-OCS/OPS, Copy 7-File																										

FORM 1551 USE PREVIOUS EDITIONS

SECRET

(13-20-43)

PLW: 15 AUG 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION					
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)			
055232		NOEL JAMES A			
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT	
RESIGNATION			08/03/68	REGULAR	
6. FUND	V TO V	V TO CF	7. Principal Analysts No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
	CF TO V	CF TO CF	129 0256 0000		
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION		
DDP/DOO US FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE			SAN FRANCISCO, CALIFORNIA		
11. POSITION NAME			12. POSITION NUMBER		

1. LAST NAME		FIRST NAME		INITIALS		2. APPOINTMENT DATA		3. TOTAL SERVICE FOR LEAVE	
Noel		James		A.		Entered on duty P/T P/T		Years Months Days	
4. DATE AND NATURE OF SEPARATION						Subject to Sec. 203(d), 1951 Leave Act		Years Months Days	
Retirement: 3/31/71 8-3-66						Yes <input type="checkbox"/> No <input type="checkbox"/>		More than 15 years <input type="checkbox"/>	
5. SUMMARY OF ANNUAL AND SICK LEAVE						6. SUMMARY OF HOME LEAVE			
(HOURS)						(DAYS)			
ANNUAL SICK						REMARKS			
5. Balance from prior leave year ended 1/9/71						SCD: 1/26/31			
480 1901						14. Date arrival abroad for HS purposes			
6. Current leave year accrual through 3/20/71						15. Current balance as of 19 None			
40 20						16. 12-month accrual rate			
Total 520 1921						17. Dates leave used, prior 24 months			
Reduction in credits, if any, (current year)						18. Monthly accrual date			
40 0						19. Calendar days credit for next accrual date			
Total leave balance						20. Date basic service period completed			
480 1921						MILITARY LEAVE			
11. Total leave paid in lump sum 480 hrs. + 1 Holiday						21. Dates during current calendar yr			
12. Salary payable \$33,757.00						22. Dates during preceding calendar yr			
13. Lump sum leave dates from 6/1/70 to 6/24/71 (Hours)						23. During leave year in which separated			
26. Signature (Signature) (Date)						24. During leave year in which separated			
Auth. Cert. Officer (Telephone)						25. During 12-month HS accrual period (dates)			
						26. During 12-month HS accrual period (dates)			

Mandatory Form 3150
November 1965
5010-108

RECORD OF LEAVE DATA TRANSFERRED

U.S. CIVIL SERVICE COMMISSION
FPM SUPPLEMENTS 290-31 AND 900-21150
Rev. 10-67Use Previous
Edition

SECRET

FVD

FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
(When Filled In)

JLB: 14 MAY 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 055292		2. NAME (LAST FIRST MIDDLE) NOEL JAMES A	
3. NATURE OF PERSONNEL ACTION REMOVAL FROM CIA RETIREMENT AND DISABILITY SYSTEM-VOLUNTARY		4. EFFECTIVE DATE MO DA YR 05 05 68	
5. CATEGORY OF EMPLOYMENT REGULAR		6. FINANCIAL ADJUSTMENT NO. CHARGEABLE 8129 0256 0000	
7. CMC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203		8. FUND V TO V CF TO V X V TO CF CF TO CF	
9. ORGANIZATIONAL DESIGNATION DDP/DOD		10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA	
11. POSITION TITLE		12. POSITION NUMBER	
13. SERVICE DESIGNATION D		14. CLASSIFICATION SCHEDULE (SEE INSTRUCTIONS)	
15. OCCUPATIONAL SERIES		16. GRADE AND STEP 16	
17. SALARY OR RATE		18. REMARKS	

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. PRICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEREST CODE	24. MOBILE CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NFE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CODE 2. DATE 3. TYPE 4. NAME	31. SEPARATION DATA CODE	32. CORRECTION/CONCILIATION DATA 1. CODE 2. DATE 3. TYPE 4. NAME	33. SECURITY REG. NO.		34. SEX	
35. VET. PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36. SERV. COMP. DATE MO DA YR	37. LONG. COMP. DATE MO DA YR	38. CAREER CATEGORY CLASS. SERV. CODE PROV. TEAM	39. REG. HEALTH INSURANCE CODE 0 HEALTH 1 YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN EMPLOYMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO PREVIOUS SERVICE 2 SERVED IN SERVICE 1940-1945 3 SERVED IN SERVICE 1946-1949		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO		44. STATE TAX DATA FORM EXECUTED 1 YES 2 NO		45. NO. TAX EXEMPTIONS STATE CODE	

SIGNATURE OR OTHER AUTHENTICATION

POSTED

R.J.

5-14-68

FORM 1150
5-66 May 19-67

Use Previous Edition

SECRET

PLW

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1962

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	55292	43	500	CF GS 16 3	\$22,753	\$23,778

SECRET
(When Filled In)

MAH: 25 OCT 67

NOTIFICATION OF PERSONNEL ACTION											
OCF											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				10 108 67		REGULAR					
6. FUNDS		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY							
<div style="display: flex; justify-content: space-between;"> Y TO Y Y TO CF </div> <div style="display: flex; justify-content: space-between;"> CF TO Y X CF TO CF </div>		8129 0256 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/DOD U.S. FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE				SAN FRANCISCO, CALIFORNIA							
11. POSITION TITLES				12. POSITION NUMBER		13. SERVICE DESIGNATION					
CHIEF OF BASE				0150		D					
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.08		16 6		28425					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEREST CODE		24. HOURS CODE	
37		10		NUMERIC ALPHABETIC 43500 DOD		75007		2		03 11 11	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. CORRECTION/CANCELLATION DATA		29. SECURITY REQ. NO.		30. SEA	
NO DA YR		NO DA YR		NO DA YR		EOD DATA		31. SECURITY REQ. NO.		32. SEA	
33. VET. PREFERENCE		34. SERV. COMP. DATE		35. LONG COMP. DATE		36. CAREER CATEGORY		37. FEGLI / HEALTH INSURANCE		38. SOCIAL SECURITY NO.	
CODE 0 NONE 1 5 YR 2 10 YR		NO DA YR		NO DA YR		CODE 0 NONE 1 5 YR 2 10 YR		CODE 0 NONE 1 5 YR 2 10 YR		CODE 0 NONE 1 5 YR 2 10 YR	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE 0: NO PREVIOUS SERVICE 1: NO BREAK IN SERVICE 2: BREAK IN SERVICE (LESS THAN 3 YRS) 3: BREAK IN SERVICE (MORE THAN 3 YRS)				CODE 0: NO 1: YES 2: NO		FORM EXECUTED CODE NO. TAX EXEMPTIONS		FORM EXECUTED CODE NO. TAX EXEMPTIONS			
SIGNATURE OR OTHER AUTHENTICATION											

FORM 5-66 1150

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GROUP 1
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declassification

(When Filled In)

POSTED
P.S.
10-25-67

D-25

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS		
055292		NOEL JAMES A		43 620		CF				
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.	
08	10	5	\$22,755	10/10/65	08	10	6	\$23,425	10/08/67	
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>Stanlyff Harris</i>						DATE <i>11 Aug 67</i>				
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLIENT INITIALS <i>RECEIVED</i>						NOTED BY				
FORM 500 E Use previous editions PAY CHANGE NOTIFICATION (4-51)										

SECRET
(When Filled In)

REF: 30-103-16

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)	
055292		MIDEL JAMES A	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE MO. DAY YR.	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT - CORRECTION		08 14 66	REGULAR
6. FUNDS	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
<div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; background-color: black; margin-right: 5px;"></div> <div> V TO V U TO V V TO U U TO U </div> </div>	X	7129 0256 0000	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/DOO US FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF		SAN FRANCISCO, CALIFORNIA	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
CHIEF OF BASE		0150	D
14. CLASSIFICATION SCHEDULE (VS, LS, NL)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0135.08	16 5	22755
18. REMARKS			
THIS ACTION CORRECTS FORM 1150 TO CHANGE EFFECTIVE DATE WHICH READ 08/10/55 TO READ 08/14/56.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE
23. INTEGRAL CODE	24. HOURS CODE	25. DATE OF BIRTH MO. DAY YR.	26. DATE OF GRADE MO. DAY YR.
		03 11 11	
27. DATE OF LEI MO. DAY YR.	28. NIE EXPIRES MO. DAY YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CSC 2. CIA 3. FICA 4. NONE
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DAY YR.	33. SECURITY REQ NO.	34. SEX
35. VET. PREFERENCE CODE	36. SERV. COMP. DATE MO. DAY YR.	37. LONG COMP. DATE MO. DAY YR.	38. CAREER CATEGORY 1. YES 2. NO
39. FECL/ HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE 1. NO PREVIOUS SERVICE 2. 0-24 MONTHS IN SERVICE 3. 24-36 MONTHS IN SERVICE 4. 36-60 MONTHS IN SERVICE 5. 60+ MONTHS IN SERVICE	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE	44. STATE TAX DATA FORM EXECUTED CODE	45. TAX EXEMPTIONS 1. YES 2. NO	46. STATE TAX DATA FORM EXECUTED CODE
SIGNATURE OR OFFICE AUTHENTICATION			

POSTED

11-30-66 AS

FORM 1150
5-66

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(4-51)

(When Filled In)

RZF 1 2 AUG 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
CONVERSION FROM <input type="checkbox"/> STATUS						MO COB YR 08 13 66		REGULAR			
6. FONDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		7136 1347 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DOP/VE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF						MADRID, SPAIN					
11. POSITION TITLES						12. POSITION NUMBER		13. SERVICE DESIGNATION			
CHIEF OF STATION						0399		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE		
GS			0136.05			16.5			22755		
18. REMARKS MADRID, SPAIN											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HONOR CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
56	10	NUMERIC 50660	ALPHABETIC WE	67033		3	MO DA YR 03 19 11	MO DA YR	MO DA YR	MO DA YR	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.	
MO DA YR				1. CSC 2. FICA 3. NONE		CODE		TYPE MO DA YR		34. SER	
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		MO DA YR		MO DA YR		CAR RESV PROV TEMP		CODE CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS.) 3 - BREAK IN SERVICE (MORE THAN 3 YRS.)						FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO				FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: right;">0803 607</div>											

FORM 11-62 1150

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

PJH: 10 AUG 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)								
055292		NOEL JAMES A								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT				08 10 66		REGULAR				
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF		7129 0256 0000		50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION						
DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF				SAN FRANCISCO, CALIFORNIA						
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
CHIEF OF BASE				0150		D				
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS		0136.08		16 5		22755				
10. REMARKS:										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	
37	10	NUMERIC	ALPHABETIC	75007		2	03 19 11			
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.		34. SEX	
NO. DA. YR.		1. CSC 2. FICA 3. NONE			TYPE NO. DA. YR.		EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CASSEN CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.
CODE 0 - NONE 1 - 5 YRS. 2 - 10 YRS.		NO. DA. YR.		NO. DA. YR.		CAP. 25% PRIV. TEMP.		CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA		
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS.) 3 - BREAK IN SERVICE (MORE THAN 3 YRS.)				FORM EXECUTED 1 - YES 2 - NO		CODE NO. TAX EXEMPTIONS		FORM EXECUTED 1 - YES 2 - NO		
SIGNATURE OR OTHER AUTHENTICATION										
FROM: WE										
[Signature]										

FORM 11-62 1150

Use Previous Edition

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

(4-5)

(When Filled In)

00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504,
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	035292	50	660	CF GS 16 5	\$22,331	\$22,755

610

PJH: 17 JAN 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM				NO DA YR 01 16 66		REGULAR					
6. FUNDS		V TO V		V TO G		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
A TO V		X		A TO G		6136 1347 0000		SECTION 203 P.L.88-643			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/WE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF						MADRID, SPAIN					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
CHIEF OF STATION						0399		D			
14. CLASSIFICATION SCHEDULE (L, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.05		02 4 16 5		20928 22331			
18. REMARKS											
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.											
MADRID, SPAIN											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. REQ. CODE	
28		10		50660 WE		67033		1		3	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. WTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	
NO DA YR 03 19 11		NO DA YR 03 20 60		NO DA YR 10 10 65		NO DA YR		NO DA YR		NO DA YR	
31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REF. NO.		34. SEX		35. VET. PREFERENCE		36. SERV. COMP. DATE	
TYPE NO DA YR		EOD DATA		REF. NO.				CODE		NO DA YR	
37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.		41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT. CODE	
NO DA YR		CODE		CODE		CODE		CODE		CODE	
43. FEDERAL TAX DATA		44. STATE TAX DATA		45. FORM EXECUTED		46. FORM EXECUTED		47. FORM EXECUTED		48. FORM EXECUTED	
CODE		CODE		CODE		CODE		CODE		CODE	
49. SIGNATURE OF OTHER AUTHENTICATION		50. SIGNATURE OF OTHER AUTHENTICATION		51. SIGNATURE OF OTHER AUTHENTICATION		52. SIGNATURE OF OTHER AUTHENTICATION		53. SIGNATURE OF OTHER AUTHENTICATION		54. SIGNATURE OF OTHER AUTHENTICATION	

FORM 1-62 1150

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 49-301
PURSUANT TO AUTHORITY OF FCY AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND AD-DCI POLICY DIRECTIVE DATED 1 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	055292	50	660	CF GS 16 5	\$21,555	\$22,331

11

F57

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
055292		NOEL JAMES A		50 660 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last EN. Date	Grade	Step	Salary	Effective Date
GS 16	4	\$20,900	10/13/63	GS 16	5	\$21,555	10/10/65
7. TYPE ACTION							
PSI LSI ADJ.							
8. Remarks and Authorization							
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY 01 663 67							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>W. B. F. [Signature]</i> DRSE 20 Aug 1965							
PAY CHANGE NOTIFICATION							

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER 055292		2. NAME (LAST-FIRST MIDDLE) NOEL JAMES A							
3. NATURE OF PERSONNEL ACTION SERIES CODE ADJUSTMENT						4. EFFECTIVE DATE 06 07 65		5. CATEGORY OF EMPLOYMENT	
6. FUNDS		V TO V C TO V		V TO U U TO U		7. COST CENTER NO.-CHARGEABLE 9136 1347 0000		8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATION DDP/NE DIVISION						10. LOCATION OF OFFICIAL STATION MADRID, SPAIN			
11. PREVIOUS TITLE CHIEF OF STATION						12. POSITION NUMBER 0399		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS-18, etc.) GS				15. OCCUPATIONAL SERIES 0136.05		16. GRADE AND STEP 16		17. SALARY OR RATE	
18. REMARKS									
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> POSTED JUN 6-7/65 </div>									
SIGNATURE OR OTHER AUTHENTICATION									

Form 11508
1-63 MFG 1-63

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Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

(4-51)

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND
 CCI MEMORANDUM DATED 1 AUGUST 1986, SALARY IS ADJUSTED AS FOLLOWS:
 EFFECTIVE 14 OCTOBER 1982

NAME	SERIAL	OPGN	FUNDS	OLD GRST SALARY	OLD GRST SALARY	NEW GRST SALARY	NEW GRST SALARY
NOEL JAMES A	055292	62460	CF 16 2	\$15515	16 2	\$16500	

SECRET
 (When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
055292		NOEL JAMES A		62 660 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE		7. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS-16	2	\$16,500	09/17/81	GS-16	3	\$17,000	10/14/82
8. Remarks and Authentication							
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>[Signature]</i>				DATE: 24 OCT 1982			
PAY CHANGE NOTIFICATION <i>[Initials]</i>							

Form 560

Obsolete Previous Edition

SECRET

(4-51)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
055292	NOEL JAMES A	62 660 CF 14	
5. OLD SALARY RATE		6. NEW SALARY RATE	
Grade	Step	Salary	Last Eff. Date
GS 16	3	\$17,000	10/14/62
Grade	Step	Salary	Effective Date
GS 16	4	\$17,500	10/13/63
7. TYPE ACTION			
PSI LSI ADJ			
8. Remarks and Authentication			
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLEHMS INITIALS AUDITED BY 663			
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.			
SIGNATURE: [Signature]		DATE: Aug 26, 1963	
PAY CHANGE NOTIFICATION			

Form 560 Obsolete Previous Edition (4-51)

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
55292	NOEL JAMES A	DDP/WH 9 UV	
5. OLD SALARY RATE		6. NEW SALARY RATE	
Grade	Step	Salary	Last Eff. Date
GS 16	1	\$15,255	03/20/60
Grade	Step	Salary	Effective Date
16	2	\$15,515	09/17/61
7. TYPE ACTION			
PSI LSI ADJ			
8. Remarks and Authentication			
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / IN LWOP STATUS AT END OF WAITING PERIOD			
[Signature] WK PAY CHANGE NOTIFICATION			

Form 560 Obsolete Previous Edition (4-51)

SECRET

AES: 26 JULY 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
ODI											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						MO DA YR 07 23 61		REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		2135 1990 1000		50 USC 403 d			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
CS/CS DEV COMP DDP WH DIVISION						HAVANA CUBA					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
CHIEF OF STATION						9997		D			
14. CLASSIFICATION SCHEDULE (GS, WD, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		03 0 16 1		13600 15255			
18. REMARKS											
RETRUNEE CASUAL											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
37	14	64997 WH		17085	1	3	MO DA YR 03 19 11		MO DA YR		MO DA YR
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	
MO DA YR				1 - YES 2 - NO		TYPE MO DA YR		EOD DATA		34. SEX	
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. MIL SERV. CREDIT/LCD		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
0 - NONE 1 - 5 PT 2 - 10 PT						1 - YES 2 - NO		0 - WAIVER 1 - YES		HEALTH INS CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		FORM EXECUTED CODE NO TAX EXEMPTIONS		FORM EXECUTED CODE NO TAX EXEMPTIONS			
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)						1 - YES 2 - NO		1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION											
FOOTED											
2/8/61 RKT											

Form 6-60 1150

Obsolete Previous Editions

SECRET

(4-51)

25-7/27/61

PSC: 7 SEPT 1961

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
ODF											
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						08 20 61		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
V TO V		2136 6400 1017		50 USC 403 J							
CF TO V		X		CF TO CF							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DOP WE MADRID STATION OFFICE OF THE CHIEF						MADRID, SPAIN					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
CHIEF OF STATION						0399		D			
14. CLASSIFICATION SCHEDULE (GS, NW, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
FSR GS				0136.01		03 0 16 1		13600 15255			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTERGEE CODE	24. HQ/INT. CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
37	10	62660	WE	67033	1	3	03 19 11				
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SER	
MO DA YR			1. CSC 2. PICA 3. NONE		CODE	TYPE MO DA YR		EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP DATE	37. LONG. COMP. DATE	38. MIL. SERV. CREDIT/LCD		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.			
CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		MO DA YR	MO DA YR	1 - YES 2 - NO		CODE CODE 0 - WAIVED 1 - YES		HEALTH INS. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE	43. FEDERAL TAX DATA				44. STATE TAX DATA		
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)				CODE	FORM EXECUTED CODE NO TAX EXEMPTIONS				FORM EXECUTED CODE NO TAX EXEMPTIONS		
					1 - YES 2 - NO				1 - YES 2 - NO		
SIGNATURE OR OTHER AUTHENTICATION											
9-11-61 [Signature]											

Form 1150
6-60

Obsolete Previous Editions

SECRET

(4.61)

JAN 9-7-61

AES: 6 APRIL 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
00F											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
CONVERSION TO PERMANENT SUPERGRADE RANK*						04 06 61		REGULAR			
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		I		CF TO CP				50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP WH BRANCH 4 HAVANA CUBA STATION						HAVANA CUBA					
11. POSITION/TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
CHIEF OF STATION						0114		0			
14. CLASSIFICATION (SCHEDULE AES, WB, WH)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY RATE			
GS				0136.01		02 0 16 1		11740 15255			
18. REMARKS											
*THE DIRECTOR OF CENTRAL INTELLIGENCE ON 6 APRIL 1961 APPROVED YOUR PERMANENT GRADE AS GS 16.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. MONTHS	
				NUMERIC ALPHABETIC						25. DATE OF BIRTH	
										26. DATE OF GRADE	
										27. DATE OF CES	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY	
W2 01 YR.				1 - CMC 2 - FICA 3 - NONE				TYPE NO. CA. 34		34. SEX	
										35. SEC. NO.	
35. PEP PREFERENCE		36. SERV. COMP. DATE		37. LONG SERV. DATE		38. MIL. SERV. CREDIT/CD		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE 0 - NONE 1 - 9 YR 2 - 10 YR		NO DA 18		NO DA 18		1 - YES 2 - NO		CODE CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)				FORM EXECUTED CODE NO TAX EXEMPTIONS FORM EXECUTED 1 - YES 2 - NO		CODE NO TYP. STATE CODE 1 - YES 2 - NO					
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10 42761 am </div>											

Form 1150

Obsolete Previous Editions

SECRET

(4-51)

2-2 4-2 1-6

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	NOEL JAMES A	555292	46 52	GS-16 1	\$14,190	\$15,255

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

PAS: 11 MARCH 1960

1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Pref.		5. Sex		6. CS - ECSD			
555292		NOEL JAMES A				Mo.	Da.	Yr.	None-0	Code				Mo.	Da.	Yr.
						03	19	11	5 Pt-1	0	M	1	09	18	47	
7. SCID		8. CSC Reint.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. Inlt. Serv. Cde			
Mo.	Da.	Yr.	Yes-1	Code		Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	
01	26	31	No-2	1	50 USCA 403 J				No-2		09	18	47	No-2	1	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code	15. Location Of Official Station				Station Code		
DDP WH BRANCH III HAVANA CUBA STATION				4652	HAVANA CUBA				17085		
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - 1	Code			0114		GS		0136.01			
USStd. - 3		CHIEF OF STATION									
Frqn. - 5	5										
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
02		\$ 10920		D		Mo. Da. Yr.		Mo. Da. Yr.			
15 4		\$ 13670				08 01 54		01 25 59		8 3545 55-055	

ACTION

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data	
PROMOTION (TEMPORARY)*		30	Mo. Da. Yr.		REGULAR		OM		
			03 20 60						

PRESENT ASSIGNMENT

31. Organizational Designations				Code	32. Location Of Official Station				Station Code		
DDP WH BRANCH III HAVANA CUBA STATION				4652	HAVANA CUBA				17085		
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - 1	Code	CHIEF OF STATION		0114		GS		0136.01			
USStd. - 3											
Frqn. - 5	5										
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
02		\$ 10920		D		Mo. Da. Yr.		Mo. Da. Yr.			
16 1		\$ 14190				03 20 60		09 17 61		0135 5450 3000	

44. Remarks

* PROMOTION TO THE GRADE INDICATED IS TEMPORARY AND FOR SUCH DURATION AS THE DIRECTOR WILL DETERMINE. YOUR PERMANENT GRADE IS THE GRADE FROM WHICH YOU ARE TEMPORARILY PROMOTED.

FOOTED

4-1-60

GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 15	3	\$13,370	07	28	57	GS 15	4	\$13,670	01	25	59
REMARKS											
<p align="center">CERTIFICATION</p> <p>I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.</p>											
TYPED, OR PRINTED, NAME OF SUPERVISOR			DATE			SIGNATURE OF SUPERVISOR					
ROBERT M. DAHLGREN			11 Dec. 1958			<i>Robert M. Dahlgren</i>					
<p align="center">PERIODIC STEP INCREASE - CERTIFICATION</p>											

FORM NO. 560
MAR. 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME				3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT	
555292		NOEL JAMES A				DDP/WH		UV			
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR				MO	DA	YR
GS 15	3	\$13,370	07	28	57	GS 15	4	\$13,670	01	25	59
<p align="center">TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER</p>											
8. CHECK ONE: <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						9. NUMBER OF HOURS LWOP 10. INITIALS OF CLERK 11. AUDITED BY					
<p align="center">TO BE COMPLETED BY THE OFFICE OF PERSONNEL</p>											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO	DA	YR	544 7/10 1/21					
14. AUTHENTICATION											

SECRET

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	555292	GS-15-3	\$12,150	\$13,370

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

SECRET

SECRET
(When Filled In)

DMG 4 APR 58												NOTIFICATION OF PERSONNEL ACTION											
1. Serial No.			2. Name (Last-First-Middle)						3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CS - LOD							
555292			NOEL JAMES A						Mo. Da. Yr. 03 19 11			None-0 5 Pt-1 10 Pt-2		Code 0		M 1		Mo. Da. Yr. 09 18 47					
7. SCD			8. CSC Rmt.			9. CSC Or Other Legal Authority			10. Apmt. Affidav.			11. FEGLI		12. LCD		13. Mil. Serv. Test.							
Mo. Da. Yr. 01 26 31			Yes-1 No-2			Code 1			50 USCA 403			Mo. Da. Yr. 09 18 47			Yes-1 No-2		Code 1						

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP WH BRANCH 11 ARGENTINA SECTION						WASH. D.C.					
16. Dept. Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. - 1 USld - 3 Fign - 5		AREA OPS OFF BR CH				0460		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. Pst. Due		26. Appropriation Number	
02 15 3		\$925 \$12150		DI		Mo. Da. Yr. 03 01 58		Mo. Da. Yr. 03 01 58		8 3500 10 200	

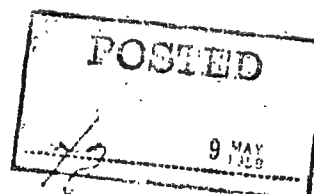
ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT		67		04 06 58		REGULAR		OM			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP WH BRANCH 111 HAVANA CUBA STATION				4652		HAVANA CUBA				17025	
33. Dept. Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. - 1 USld - 3 Fign - 5		CHIEF OF STATION				0114		GS		0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. Pst. Due		43. Appropriation Number	
02 15 3		\$925 \$12150		DI		Mo. Da. Yr. 03 01 58		Mo. Da. Yr. 03 01 58		8 3545 55 055	

44. Remarks



SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 555292		2. NAME NOEL JAMES A			3. ASSIGNED ORGAN. DDP/WH -2		4. FUNDS UV		5. ALLOTMENT		
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
15	2	\$11,880	01	29	56	15	3	\$12,150	07	28	57
REMARKS											
<p align="center">CERTIFICATION</p> <p>I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.</p>											
TYPED OR PRINTED NAME OF SUPERVISOR J.C. KING			DATE 16 July 57			SIGNATURE OF SUPERVISOR <i>J.C. King</i>					
<p align="center">PERIODIC STEP INCREASE CERTIFICATION</p>											

FORM NO. 560

SECRET

PERSONNEL FOLDER (4)

1. EMP. SERIAL NO. 555292		2. NAME NOEL JAMES A			3. ASSIGNED ORGAN. DDP/WH		4. FUNDS UV		5. ALLOTMENT		
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
15	2	\$11,880	01	29	56	15	3	\$12,150	07	28	57
<p align="center">TO BE COMPLETED BY THE OFFICE OF COMPTROLLER</p>											
<p>8. CHECK ONE: <input type="checkbox"/> NO EXCESS LWOP</p> <p>IF EXCESS LEAVE LWOP, CHECK FOLLOWING:</p> <p><input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD</p> <p><input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD</p>						<p>9. NUMBER OF HOURS LWOP</p>					
<p align="center">TO BE COMPLETED BY THE OFFICE OF PERSONNEL</p>						<p>10. INITIALS OF CLERK</p>					
<p>11. AUDITED BY</p>						<p>12. PROJECTED SALARY RATE AND EFFECTIVE DATE</p>					
GRADE	STEP	SALARY	EFFECTIVE DATE			13. REMARKS					
			MO.	DA.	YR.						
14. AUTHENTICATION											
<p align="center">PERIODIC STEP INCREASE - AUTHENTICATION</p>											

FORM NO. 560a

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS. - ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
MR. JAMES A. NOEL		555292	19 Mar 1911	28 Jun 1957
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
REASSIGNMENT		56	10 Jun 1957	50 USEA 403 J
FROM		TO		
BA-40		Area Ops Officer (Br Ch) BA-460 (Attache)		
Branch I		03-0136.01-15 \$11,880.00 per annum (FSS-3 \$9635.00 per annum)		
8. POSITION TITLE		9. SERVICE SERIES, GRADE, SALARY		
10. ORGANIZATIONAL DESIGNATION		DDP/WH Branch II Argentine Section		
11. HEADQUARTERS		Washington, D. C.		
12. FIELD OR DEPT'L		13. FIELD OR DEPT'L		
FIELD		DEPARTMENTAL		
14. VETERAN'S PREFERENCE		15. POSITION CLASSIFICATION ACTION		
NONE WWII OTHER S.P.T. 10-POINT		NEW VICE I. A. REAL		
X		SD/DI		
16. APPROPRIATION		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)		18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
FROM 7-3500-10-200 750-13		Yes		19. LEGAL RESIDENCE
TO: SAME				CLAIMED PROVED
20. REMARKS:		21. SIGNATURE OR OTHER AUTHENTICATION		
3 EOD 09/18/47		POSTED 5 JUL 1957 Lw		
ENTRANCE PERFORMANCE RATING:				
Director of Personnel				

SECRET

1. EMPLOYEE COPY

27 7/1/57

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL
(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1954-270090

1. Agency and organizational designation		2. Payroll period		3. Book No.		4. Slip No.							
5. Employee's name (and social security account number when appropriate)		6. Grade and salary											
ROBERT J. WILSON		GS-15 \$11,510											
PAYROLL CHANGE DATA													
	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. L. C. A.	STATE TAX	GROUP LIFE INS.		NET PAY	
7. Previous normal													
8. New normal													
9. Pay this period													
10. Remarks										11. Appropriation(s)		12. Prepared by	
CIVIL DIVISION										WTL-5		Feb 10 Nov 55	
												13. Audited by	
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase													
14. Effective date		15. Date last step-increase		16. Old salary rate		17. New salary rate		18. Performance rating (Satisfactory or better) SERVICE AND CONDUCT ARE SATISFACTORY					
29 Jan 56		1 Jan 56		\$11,510		\$11,510		(Signature or other authentication)					
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods)										(Check applicable box in case of excess LWOP)			
<input type="checkbox"/> No excess LWOP. Total excess LWOP										<input type="checkbox"/> in pay status at end of waiting period.			
										<input type="checkbox"/> in LWOP status at end of waiting period.			
STANDARD FORM NO. 1126a—Revised										Initials of Clerk			
Form prescribed by Comp. Gen. U. S. G.													
October 26, 1954, General Regulations No. 102													

CONFIDENTIAL

PAYROLL CHANGE SLIP — PERSONNEL COPY

SECRET
(WHEN FILLED IN)

NOTIFICATION OF PERSONNEL ACTION

rws

1. NAME (MR.-MISS-MRS.-ONE GIVEN NAME, INITIAL(S), AND SURNAME) MR. JAMES A. HOEL		2. DATE OF BIRTH 19 Mar 1911	3. JOURNAL OR ACTION NO.	4. DATE 25 Jan 1956
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) REASSIGNMENT		6. EFFECTIVE DATE 29 Jan 1956	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 j	
FROM Area Ops Off (Sta Ch) BAF-93 OS-0136.01-15 \$11,610.00 per annum (FSS-3 \$9120.00 per annum) IDP/WE Caracas, Venezuela		8. POSITION TITLE Area Ops Officer (B. C.) BA-40 OS-0136.01-15 \$11,610.00 per annum (FSS-3 \$9120.00 per annum) IDP/WE Branch I - HMC Washington, D. C.	TO	
13. VETERAN'S PREFERENCE NONE WWII OTHER 5-PT. 10-POINT <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		14. POSITION CLASSIFICATION ACTION NEW VICE E.A. REAL SD-DI		
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 6-3588-55-066 TO: 6-3580-10-800	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: Calif.		21. REMARKS: <div style="text-align: right;">POSTED 26 JAN</div>		
ENTRANCE PERFORMANCE RATING: Director of Personnel				
22. SIGNATURE OR OTHER AUTHENTICATION				

SECRET

1. EMPLOYEE COPY

Handwritten signature/initials

STANDARD FORM 52
FORM 5272 OF THE
U. S. CIVIL SERVICE COMMISSION
MILITARY AND FEDERAL PERSONNEL
MANUAL, CHAPTER IV

SECRET

CONFIDENTIAL FUNDS

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
MR. JAMES A. NOEL	19 Mar. 1911	-	26 May 54
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) PROMOTION		6. EFFECTIVE DATE A. PROPOSED: ASAP	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: AUG 1 1954	

FROM: AREA OPS OF (STA CH), BAF-93-14 GS-0136-01-14, \$9800.00 p.a. \$7929.00 p.a.) DDP/WH CARACAS, VENEZUELA <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS 13. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	TO: AREA OPS OF (STA CH), BAF-93 GS-0136-01-15, \$10,800.00 p.a. \$7929.00 p.a.) DDP/WH CARACAS, VENEZUELA <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL
---	---	--

A. COMMENTS (Use reverse if necessary) BAF-93	PERIODIC STEP INCREASE DUE 15 Aug 54 TO SALARY \$10,000.00
--	---

B. REQUESTED BY (Name and title) J. King	C. REQUEST APPROVED BY Signature: J. King Title: DDP/WH Admin
D. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) V. C. LYNCH, x-4451	

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> CD: FI
--

15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> O	17. APPROPRIATION FROM: 4-3509-55-066 TO: 8800	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> APPROVED STATE: FL
--	---	--	--	--	---

21. STANDARD FORM 50 REMARKS <div>29 June 54 J. M. Collins 1954</div> <div>POSTED R/H 7/27</div>

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL			
E.			
F. APPROVED BY Joseph B. Rogers July 22, 1954. For Robert H. Rogers			

APPROVED BY
FI CAREER SERVICE BOARD
DATE: JUN 23 1954

STANDARD FORM 52
FORM 52-1 (Rev. 1-55)
JANUARY 1955 EDITION
GSA GEN. REG. NO. 27
MAY 1955 EDITION

SECRET

UNVOICED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss, etc.—One given name, initial(s), and surname)
Mr. James A. NOEL

2. DATE OF BIRTH
19 Mar. 1911

3. REQUEST NO.
-

4. DATE OF REQUEST
16 Feb. 54

5. NATURE OF ACTION REQUESTED:
A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)
Reassignment

6. EFFECTIVE DATE
A. PROPOSED:
28 Feb. 54

7. C. S. OR OTHER
LEGAL AUTHORITY

8. POSITION (Specify whether establish, change grade or title, etc.)

9. APPROVED:
FEB 28 1954

FROM: OPS OF - CHIEF, BA-121-14

OS-132-14, \$9800.00 p.a.
\$7929.00 p.a.)

DDP/WH

CARACAS, VENEZUELA

8. POSITION TITLE AND
NUMBER

9. SERVICE, GRADE, AND
SALARY

10. ORGANIZATIONAL
DESIGNATION

11. HEADQUARTERS

12. FIELD OR DEPARTMENTAL

TO: ARZA OPS OF - STA CH/ BAP-93-14

OS-0136.01-14, \$9800.00 p.a.
\$7929.00 p.a.)

DDP/WH

CARACAS, VENEZUELA

13. FIELD ☒ DEPARTMENTAL ☐

14. FIELD ☒ DEPARTMENTAL ☐

A. REMARKS (Use reverse if necessary)

BAP-93

B. REQUESTED BY (Name and title)

V. C. Lynch

C/MH

D. REQUEST APPROVED BY

Signature:

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)

V. C. LYNCH, x-1457

Title:

13. VETERAN PREFERENCE

NONE ☒ WITH ☐ OTHER ☐ 3-PT. ☐ 10 POINT ☐
DISAB ☐ OTHER ☐

14. POSITION CLASSIFICATION ACTION

NEW ☐ VICE ☐ I. A. ☐ REAL ☐

CD: FI

15. SEX
M

16. RACE
W

17. APPROPRIATION

FROM: 4-3588-55-066
TO: same

18. SUBJECT TO C. S.
RETIREMENT ACT
(YLS-NO)

19. DATE OF APPOINTMENT
AFFIDAVITS
(ACCESSIONS ONLY)

20. LEGAL RESIDENCE

☐ CLAIMED ☐ PROVED
STATE:

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B. CEIL. OR POS. CONTROL	<i>ICW</i>	<i>2/19</i>	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL	<i>P. Taylor</i>	<i>1/12/54</i>	
E			

F. APPROVED BY

P. Taylor 19 Feb 54

10-57329-6

U. S. GOVERNMENT PRINTING OFFICE: 1953-008490

1. Agency and organizational designations		2. Pay roll		3. Sheet No.	4. Slip No.				
5. Employee's name (and social security account number when appropriate) SOUL, James A.		6. Grade and salary GS - 14 38 \$9600							
PAY ROLL CHANGE DATA									
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F.I.C.A.		NET PAY
7. Previous period									
8. New period									
9. Pay this period									
10. Remarks: <i>in m 4/16</i>				11. Appropriation(s) VR		12. Prepared by Jan 2/17/53			
						13. Audited by			
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase									
14. Effective date 15 Feb 53	15. Does last pay period increase 19 Aug 53	16. Old salary rate \$7600	17. New salary rate \$9800	18. Performance rating is satisfactory or better. (Signature or other authentication)					
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods): Period(s) <input type="checkbox"/> No excess LWOP <input type="checkbox"/> Total excess LWOP				(Check applicable box in case of excess LWOP) <input type="checkbox"/> LWOP status and other pertinent data <input type="checkbox"/> LWOP status and other pertinent data <input type="checkbox"/> LWOP status and other pertinent data					
STANDARD FORM NO. 1126-Rev. 5-52 Form prescribed by Comp. Gen., U. S. Nov. 8, 1952, General Regulations No. 102						PAY ROLL CHANGE SLIP—PERSONNEL COPY 1 <i>De</i>			

STANDARD FORM 52
FORM 52-1 (Rev. 1-53)
U. S. GOVERNMENT PRINTING OFFICE
16-57250-2

SECRET

SECURITY INFORMATION UNCLASSIFIED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Mrs - Miss - One given name, initial(s), and surname) Mr. James A. NOEL	2. DATE OF BIRTH 19 Mar. 1911	3. REQUEST NO. -	4. DATE OF REQUEST 7 Mar. 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED: 29 Mar. 53	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM: INTELL. OFF (Chief of Station, CG-14) CG-14, 2200 P.A. 57600 DDI 57600 WH: I Caracas, Venezuela	9. POSITION TITLE AND NUMBER OPS OF (CHIEF), BA-121-14 57600 57600 DSP WH: I Caracas, Venezuela	10. SERVICE, GRADE, AND SALARY 57600 57600
11. ORGANIZATIONAL DESIGNATIONS	12. HEADQUARTERS	13. FIELD OR DEPARTMENTAL
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary) BA-121		APPROVED BY: FI CAREER SERVICE BOARD	
B. REQUESTED BY (Name and title) J. C. LEECH, X-157		C. REQUEST APPROVED BY Edward C. McHanna	
D. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		E. DATE OF REQUEST 11 March 53	

13. VETERAN PRECEDENCE		14. POSITION CLASSIFICATION ACTION	
NONE	WHEN OTHER	NEW	VICE
15. SEX MALE		16. RACE WHITE	
17. APPOINTMENT 3529		18. SUBJECT TO C. S. RETIREDMENT ACT (YES-NO)	
19. DATE OF APPOINTMENT BY: 3529		20. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED	

21. STANDARD FORM 50 REMARKS		FOOTNOTED AK 26 Mar	
------------------------------	--	-------------------------------	--

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPLOY			
E.			

F. APPROVED BY Mr. L. Shobe 3/23/53

STANDARD FORM 52
PREPARED BY THE
U. S. CIVIL SERVICE COMMISSION
JANUARY 1950 - FEDERAL VERSION
REPLACES FORMS 52-1
AND 52-2

REQUEST FOR PERSONNEL ACTION

UNVOICED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Mrs - One given name, initials, and surname) Mr. James A. NOEL <i>555 292</i>	2. DATE OF BIRTH 19 Mar 1911	3. REQUEST NO.	4. DATE OF REQUEST 7 May 56
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE B. PROPOSED: MAY 20 1956	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: MAY 20 1956	

FROM - Area Ops Officer (Br Ch) BA-40	10. POSITION TITLE AND NUMBER Area Ops Officer (Br Ch) BA-40	TO - Area Ops Officer (Br Ch) BA-40
11. SERVICE, GRADE AND SALARY GS-0136.01-15 \$11880.00 p.a. \$9380.00 p.a.	12. ORGANIZATIONAL DESIGNATIONS DDP/WH Branch I Washington, D. C.	13. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL
14. REMARKS (Use reverse if necessary) New T/O	15. USED IN LIEU OF SF50 NOTIFICATION OF PERSONNEL ACTION	

16. REQUESTED BY (Name and title) <i>Philip C. Bowers</i> C/WH		17. REQUEST APPROVED BY Signature: _____ Title: _____	
18. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>		19. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> E.A. <input type="checkbox"/> RAIL <input type="checkbox"/>	
20. SEX M	21. APPROPRIATION FROM: 6-3500-10-200 TO: Same	22. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	23. DATE OF APPOINT- MENT AUTHORITY (ACCESSORY ONLY)
24. STANDARD FORM 50 REMARKS APPROVED BY FI CAREER SERVICE BOARD DATE: 14 May 56		25. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: _____	

26. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.			
E.			
F. APPROVED BY <i>Robert E. ...</i> per John J. Caldwell 16 May 56 (J.F.B.)			

SECRET

MR

CONFIDENTIAL FUNDS PERSONNEL ACTION

21 Aug 52

NAME NOEL, James A.		DATE 14 August 1952
BIRTHDATE [REDACTED]		EFFECTIVE DATE 15 August 1952
	FROM	TO
TITLE	Intell. Off. (Chief)	[REDACTED]
GRADE AND SALARY	GS-14, \$2900	\$7689.
OFFICE		
DIVISION	WH	WH
BRANCH	1	1
OFFICIAL STATION	Caracas, Venezuela	Caracas, Venezuela
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT INSPECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER <i>J. C. [Signature]</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>		
OATH OF OFFICE AND NO-STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS:		
[REDACTED]		

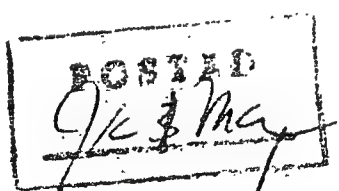
3025712

29 August 52 HP

SECRET

FDY MR
30 Apr 52 T.H.

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOLLE, James A.		DATE 12 March 1952
NATURE OF ACTION Reassignment Reassignment		EFFECTIVE DATE 27 April 1952
TITLE	<i>Intell off</i> Chief of Station, GS-14	<i>Intell off</i> Chief of Station, GS-14
GRADE AND SALARY	GS-14, \$9600.00 per annum	GS-14, \$9600.00 per annum
OFFICE	OSO	
DIVISION	FLT	WII
BRANCH	EC	Branch I
OFFICIAL STATION	Buenos Aires, Argentina (#3510)	Caracas, Venezuela (#3529)
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
<i>C. M. Buss - 4-24-52</i>	<i>1-801</i>	<i>1-801</i>
CLASSIFICATION	PERSONNEL OFFICER	
<i>Very P. B. B. 4-24-52</i>	<i>A. C. C. 4-24-52</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: S-#1.		
<div style="text-align: right;">132</div> <div style="text-align: center;">  </div> <div> <i>1-17-52. C. M. B.</i> 12 March 1952 ACM </div>		

FORM NO. 27-1
NOV 1949

SECRET

GPO 33-400339

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME NOEL, James A.		DATE 16 July 1951
NATURE OF ACTION Promotion		EFFECTIVE DATE 19 August 1951
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH	FROM	TO
	Chief of Station, GS-13	Chief of Station, GS-11
	GS-13, \$7800.00 per annum	GS-11, \$6800.00 per annum
	OSO	OSO
	FDT	FDT
ED		EC
OFFICIAL STATION Buenos Aires, Argentina		Buenos Aires, Argentina
QUALIFICATIONS	APPROVAL	
<i>R. J. G. [Signature]</i>	FOR ASSISTANT DIRECTOR <i>Harvey D. [Signature]</i>	EXECUTIVE
CLASSIFICATION <i>4/17/51 F-648</i>	PERSONNEL OFFICER <i>A. C. [Signature]</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/> 5:130
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		PURSUANT TO DCI DIRECTIVE 15 JULY 23 OCT 1951 SALARY ADJUSTED TO \$ 9600
REMARKS: Slot # 87.		SIGNATURE OF AUTHENTICATING OFFICER <i>[Signature]</i>

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOLL, James A.		DATE 19 September 1950
NATURE OF ACTION Periodic Pay Increase		EFFECTIVE DATE 17 September 1950
	FROM	TO
TITLE	Intelligence Officer (Staff)	Intelligence Officer (Staff)
GRADE AND SALARY	GS-13 \$7600.00	GS-13 \$7800.00
OFFICE	OSO	OSO
DIVISION	FDT	FDT
BRANCH		
OFFICIAL STATION	Buenos Aires	Buenos Aires
QUALIFICATIONS	APPROVAL	
	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
		SIGNATURE OF AUTHENTICATING OFFICER
REMARKS:		
<p>L.S.I. 7 March 1949. This is to certify that the conduct and services of the employee during this period were satisfactory in all respects.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>POSTED 9/12/50</p> </div> <div style="text-align: center;"> <p><i>[Signature]</i> DEPARTMENT CHIEF</p> </div> <div style="text-align: center;"> <p><i>[Signature]</i> BND H</p> </div> </div>		

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME NOEL, James A.	DATE 10 November 1949	
NATURE OF ACTION Conversion - Classification Act of 1949*	EFFECTIVE DATE 30 October 1949	
	FROM	TO
TITLE	Intelligence Officer (Staff)	Intelligence Officer (Staff)
GRADE AND SALARY	CAF-13 \$7432.20	GS-13 \$7800.00
OFFICE	OSO	OSO
BRANCH	FBT	FDT
DIVISION		
OFFICIAL STATION	Buenos Aires	Buenos Aires
QUALIFICATIONS	<div style="text-align: center;">APPROVAL</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">FOR ASSISTANT DIRECTOR</div> <div style="width: 45%;">EXECUTIVE</div> </div>	
CLASSIFICATION		
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <div style="float: right; text-align: right;"> YES <input type="checkbox"/> NO <input type="checkbox"/> </div>		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
<div style="text-align: right; margin-top: 10px;"> _____ <small>SIGNATURE OF AUTHENTICATING OFFICER</small> </div>		
REMARKS: <div style="margin-left: 40px;">* Per authority contained in ltr DCI - 28 October 1949</div>		

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME James A. Noel		DATE 28 June 1949	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP U.S.	SEX Male	DATE OF BIRTH 19 March 1911	MARITAL STATUS Married
NO. OF DEPENDENTS		DATE OF APPOINTMENT	
NATURE OF ACTION Transfer and Reassignment		EFFECTIVE DATE 24 July 1949	
	FROM		TO
TITLE	Chief		Intelligence Officer (Staff)
GRADE AND SALARY	CAF-13, \$7432.20		CAF-13, \$7432.20
OFFICE	OSO		OSO
BRANCH	FBT		FBT
DIVISION			
OFFICIAL STATION	Guatemala City		Buenos Aires
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION <i>Copy in PAFS - 1005 CONFIDENTIAL FILES - 1005</i>		<i>Wm G. Thayer</i> FOR THE ASSISTANT DIRECTOR	
		PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO			
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____ <i>18 10/10/49</i>			
ENTERED ON DUTY _____			
AUTHENTICATED BY _____			
REMARKS S-2 Subject is replacement for Vernet L. Gresham who is leaving that slot.			

FORM NO. 57-1 - PREVIOUS EDITIONS ARE NOT TO BE USED.
FEB 1949

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

JB.

NAME NOEL, James Arthur				DATE 25 February 1949	
RESIDENCE AT TIME OF EMPLOYMENT					
LOCAL ADDRESS					
CITIZENSHIP USA	SEX M	DATE OF BIRTH 19 March 1911	MARITAL STATUS Married	NO. OF DEPENDENTS	DATE OF APPOINTMENT
NATURE OF ACTION Promotion				EFFECTIVE DATE 7 March 1949	
		FROM		TO	
TITLE		Chief of Station		Chief of Station	
GRADE AND SALARY		CAF-12 8674.00		CAF-13 87432.20	
OFFICE		OSO - FBI		OSO - FBI	
BRANCH					
DIVISION					
OFFICIAL STATION		Guatemala City		Guatemala City	
APPROVAL					
FIELD			HEADQUARTERS		
CHIEF OF STATION			FOR THE ASSISTANT DIRECTOR		
			PERSONNEL OFFICER		
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS			YES <input type="checkbox"/> NO <input type="checkbox"/>		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____					
SECURITY CLEARED ON _____					
OVERSEAS AGREEMENT SIGNED _____					
ENTERED ON DUTY _____					
AUTHENTICATED BY _____					
REMARKS					
Subject has been in grade since 20 October 1946.					

100-1 IN EX-100-11-12
CONFIDENTIAL FUNDS BRANCH
INITIALS

CE 3/31/49
Jef

SECRET

This form is to be initiated in the **SECURITY** appropriate branch or office Chief for personnel and is subject to the personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>NOEL, JAMES A.</u>		DATE <u>19 March 1947</u>	
NATURE OF ACTION <u>Periodic Increase</u>		NUMBER OF DEPENDENTS <u>One</u>	
EFFECTIVE DATE <u>6 April 1947</u>		LOCATION OF DEPENDENTS _____	
MARITAL STATUS <u>Married</u>		CITIZENSHIP <u>U.S.</u> SEX <u>M</u> AGE <u>35</u>	
FROM		TO	
POSITION <u>Chief of Station</u>		POSITION <u>Chief of Station</u>	
CONTROL NO. _____		CONTROL NO. _____	
CLASSIFICATION <u>CAF-12</u>		CLASSIFICATION <u>CAF-12</u>	
ANNUAL GROSS SALARY <u>\$5905.20</u>		ANNUAL GROSS SALARY <u>\$6144.60</u>	
OFFICIAL STATION <u>Guatemala City, Guatemala</u>		OFFICIAL STATION <u>Guatemala City, Guatemala</u>	
ALLOWANCES:		ALLOWANCES:	
QUARTERS _____		QUARTERS _____	
COST OF LIVING _____		COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____		SPECIAL FOREIGN LIVING _____	
TOTAL _____		TOTAL _____	
OFFICE:		OFFICE:	
BRANCH <u>OSO-FBI</u>		BRANCH <u>OSO-FBI</u>	
DIVISION _____		DIVISION _____	

TO BE PAID BY _____ OFFICE \$ _____

TAX WITHHELD IN UNITED STATES _____

INSURANCE TO BE WITHHELD IN UNITED STATES _____
(Amount subject to change if premium is increased or decreased)

SAVINGS BONDS 12.50

PETIREMENT WITHHELD IN UNITED STATES 37.50

OTHER (Specify in detail) _____

ALLOTMENTS _____
(Name of Allottee) 1122.60

Address _____

TOTAL GROSS SALARY PER PAY PERIOD 472.60

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

Periodic Pay Increase - Last Salary Increase - 1 Sep 1946

APPROVED _____ OFFICE
(Field)

(Chief of Mission) Date _____

(Security Officer) Date _____

(Special Funds Officer) Date _____

APPROVED _____ OFFICE

(Administrative Officer) Date _____

(Branch Chief) Date 20/3/47

(Chairman, Pers. Review Com.) Date _____

(Special Funds Officer) Date 24/4/47

PERSONNEL ACTION REQUEST

SECRET

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>NOEL, JAMES A.</u>		DATE <u>8 March 1947</u>	
NATURE OF ACTION <u>Transfer</u>		NUMBER OF DEPENDENTS <u>one</u>	
EFFECTIVE DATE <u>10 March 1947</u>		LOCATION OF DEPENDENTS _____	
MARITAL STATUS <u>married</u>		CITIZENSHIP <u>American</u> SEX <u>Male</u> AGE <u>35</u>	
FROM		TO	
POSITION <u>Chief of Station</u>		POSITION <u>Chief of Station</u>	
CONTROL NO. _____		CONTROL NO. _____	
CLASSIFICATION <u>CAF-12</u>		CLASSIFICATION <u>CAF-12</u>	
ANNUAL GROSS SALARY <u>\$5905.20</u>		ANNUAL GROSS SALARY <u>\$5905.20</u>	
OFFICIAL STATION <u>Barcelona, Spain</u>		OFFICIAL STATION <u>Guatemala City, Guatemala</u>	
ALLOWANCES:		ALLOWANCES:	
QUARTERS _____		QUARTERS _____	
COST OF LIVING _____		COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____		SPECIAL FOREIGN LIVING _____	
TOTAL _____		TOTAL _____	
OFFICE:		OFFICE:	
BRANCH <u>OSO - FRK</u>		BRANCH <u>OSO - FRK</u>	
DIVISION _____		DIVISION _____	

TO BE PAID BY _____ OFFICE \$ _____
 (Field)

TAX WITHHELD IN UNITED STATES _____

INSURANCE TO BE WITHHELD IN UNITED STATES
 (Amount subject to change if premium is increased or decreased) _____

SAVINGS BONDS _____

RETIREMENT WITHHELD IN UNITED STATES _____

OTHER (Specify in detail) _____

ALLOTMENTS _____
 (Name of Allottee)

Address _____

TOTAL GROSS SALARY PER PAY PERIOD \$ _____

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

Form No. 37-1
 Sep 1946

SECRET

(Signature of Employee)

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED _____ OFFICE
(Field)

(Chief of Mission) Date _____

(Security Officer) Date _____

(Special Funds Officer) Date _____

Wm. P. Ruden 14 Mar 47

APPROVED - U.S. OFFICE

W. Duggan Date _____
(Administrative Officer)

Raymond G. Lutz Date 4/3/47
(Branch Chief)

Stefan E. Edwards Date 14 Mar 47
(Chairman, Review Com.)

E. Nichols Date 18 Mar 47
(Special Funds Officer)

PERSONNEL ACTION REQUEST

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>NOEL, JAMES A.</u>		DATE <u>OCT 20 1946</u>
NATURE OF ACTION <u>New Appointment</u>	NUMBER OF DEPENDENTS <u>one</u>	
EFFECTIVE DATE <u>OCT 20 1946</u>	LOCATION OF DEPENDENTS <u>Barcelona, Spain</u>	
MARITAL STATUS <u>married</u>	CITIZENSHIP <u>American</u> SEX <u>Male</u> AGE <u>35</u>	
FROM	TO	
POSITION _____	POSITION <u>Chief of Station, Barcelona</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION _____	CLASSIFICATION <u>CAF-12</u>	
ANNUAL GROSS SALARY _____	ANNUAL GROSS SALARY <u>\$5905.20</u>	
OFFICIAL STATION _____	OFFICIAL STATION <u>Barcelona, Spain</u>	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS <u>\$ 900.00</u>	
COST OF LIVING _____	COST OF LIVING <u>840.00</u>	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL <u>\$ 1,740.00</u>	
OFFICE:	OFFICE:	
BRANCH _____	BRANCH <u>FSRO</u>	
DIVISION _____	DIVISION _____	

TO BE PAID BY <u>Madrid</u> OFFICE	\$ <u>121.53</u>
(Field)	
TAX WITHHELD IN UNITED STATES	
INSURANCE TO BE WITHHELD IN UNITED STATES	
(Amount subject to change if premium is increased or decreased)	<u>12.50</u>
SAVINGS BONDS	<u>37.50</u>
RETIREMENT WITHHELD IN UNITED STATES	
OTHER (Specify in detail)	
<u>Acct. of J. A. & Lillian B. Noel</u>	
ALLOTMENTS <u>First National Bank of San Diego</u>	<u>282.71</u>
(Name of Allottee)	
Address <u>5th & Broadway, San Diego, California</u>	
TOTAL GROSS SALARY PER PAY PERIOD	\$ <u>4544.24</u>

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

Form No. 37-1
Sep 1946

James A. Noel
(Signature of Employee)

JOB DESCRIPTION:

Chief of Station at Barcelona. Administration of office. Preparation of all administrative and intelligence reports emanating from Barcelona office. Direction of Barcelona chains. Direction of [] chains with contact maintained by occasional visit to that area. Processing of [] material. Preparation on behalf of the Consulate General, Barcelona, of political reports; of reports on military activity on behalf of the Military Attache, Madrid, and of weekly report on movement of naval vessels on behalf of the Naval Attache, Madrid (through the Consulate General). Cooperation with the Joint [] Trusteeship [], on "safe haven" cases. Liaison with []

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED Madrid OFFICE
(Field)
[] Date 20.10.46
(Chief of Mission)
[] Date _____
(Security Officer)
[] Date _____
(Special Funds Officer)

Wm G. Thayer

APPROVED U.S. OFFICE
[Signature] Date 13 Nov
(Administrative Officer)
CW. Tenney Date 14 Nov
(Branch Chief)
[] Date _____
(Chairman, Personnel Review Com.)
[Signature] Date 17 Nov
(Special Funds Officer)

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Noel, James A.			2. DATE OF BIRTH 3-19-11	3. SEX M	4. GRADE GS-16
5. OFFICIAL POSITION TITLE Chief of Base			7. OFF/DIV/BR OF ASSIGNMENT DDP/DOD		6. SD D
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 April 67 - 31 March 1968		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to resignation or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong: Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Chief of Base supervising six professional and three clerical subordinates.					S
SPECIFIC DUTY NO. 2 Establishment and maintenance of operational support mechanisms.					S
SPECIFIC DUTY NO. 3 Operational reporting.					S
SPECIFIC DUTY NO. 4 Liaison with FBI and DCS, et al.					S
SPECIFIC DUTY NO. 5 Direction of recruitment and handling of support assets.					S
SPECIFIC DUTY NO. 6					RATING LETTER
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> </div>					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

28 JUL 1968

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give intent and direction for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUL 19 11 08 AM '68

Mr. Noel is much too experienced and practiced a hand for his performance to vary very much from year to year. He has continued to turn in the highly creditable performance in San Francisco that has been standard for him for many years. He has managed his subordinates well and has exercised uniformly good judgment in directing their operational efforts. Of particular value has been his steadiness in the face of administrative adversity disrupting the organization of his Base. Mr. Noel insured that the work of the Base continued uninterrupted and demonstrated his capacity to keep on top of all details and report them to Headquarters as appropriate. It is a credit to Mr. Noel that in the post-Ramparts exposure period there was not a single instance of an academic asset withdrawing from a relationship with the Base.

The performance of his officers attests the careful guidance and wise leadership which has enabled them to operate securely and well in sensitive areas. His relations with the FBI and DCS are excellent. He is appropriately economy minded. In short, he is a decidedly strong supervisor.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

18 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Mr. Noel is in the Field and will be shown a copy of this Fitness Report on his next TDY trip to Headquarters.

DATE

15 July 1968

OFFICIAL TITLE OF SUPERVISOR

C/DO/I

TYPED OR PRINTED NAME AND SIGNATURE

Stanley H. Gaines

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur in rating officer's judgment.

DATE

17 July 1968

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, DO Division

TYPED OR PRINTED NAME AND SIGNATURE

Gordon E. Jorgensen

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYER SERIAL NUMBER			
				055292			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE	5. SO
Noel, James A.			3/19/11		M	16	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Chief of Base			DDP/DOD		San Francisco		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):				<input checked="" type="checkbox"/> ANNUAL SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1966 - 31 March 1967			
SECTION B				PERFORMANCE EVALUATION			
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Chief of Base supervising six professional and three clerical subordinates.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Establishment and maintenance of operational support mechanisms.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Operational reporting.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Liaison with the FBI and DCS, et al.						S	
SPECIFIC DUTY NO. 5						RATING LETTER	
Direction of recruitment and handling operations.						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
31 AUG 1967 <i>ms</i>							
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
							S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Noel is an old hand at running Bases or Stations abroad and his performance as Chief of Base, San Francisco, amply attests that. It goes without saying that he understands all aspects of the business, knows how to delegate, organize, direct and report. He has continued to do all these things well. His seniority, experience and maturity served the Agency in particularly good stead during this period when the location of his Base was compromised in the public press, through no fault of Mr. Noel. His subsequent and consequent actions were all taken with sound judgment and appropriate calm and circumspection. He was also most receptive to, and cooperative in, Headquarters suggestions in this matter. He is, of course, cost conscious and an excellent supervisor. His overall performance is that of a high order of senior Agency officers.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6 months	Subject is in the field; a copy of this report is being retained to show him on his next TDY to Hqs.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
21 August	C/DO/I	(signed in draft) Stanley H. Gaines
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Concur fully in overall rating of "Strong".		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 August 1967	Chief, DO Division	Gordon L. Jorgensen

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 055292	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) NOEL, James A.			2. DATE OF BIRTH 19 March 1911	3. SEX M	4. GRADE GS-16	5. SD D	
6. OFFICIAL POSITION TITLE Chief of Station			7. OFF/DIV/BR OF ASSIGNMENT UDP/WE/Iberinn		8. CURRENT STATION Madrid		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 April 1965 - 27 September 1965				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 My rating of the performance of this officer remains the same as the description of his performance which is contained in his fitness report for the period ending 31 March 1965.						RATING LETTER	
SPECIFIC DUTY NO. 2						RATING LETTER	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

20

SECRET

(When Filled In)

OFFICE OF PERSONNEL

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

MAIL ROOM

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Mr. Noel is currently at his overseas post.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
27 September 65	Chief, WE Division	William D. O'Ryan
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19 OCT 1965	ADDP	Thomas H. Karamessines

SECRET

SECRET

12 May 1965

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: James A. Noel, Employee Serial No. 055292
Fitness Report for the Period 1 April 1964
to 31 March 1965

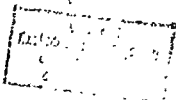
WE
D
Hdgrs. 3

1. Subject, who was born 19 March 1911, is a GS-16 and has been assigned to Madrid as Chief of Station since October 1961.

2. As Chief of Station, he is charged with the organization and management of the station and is responsible for the planning, direction, and supervision of all its activities. He also exercises general supervision of the Barcelona base. Assisting him and under his general supervision are [redacted] contract employees.

3. Subject serves as the Ambassador's principal intelligence officer, as chairman of the Embassy Defector Committee, as the Agency representative on the Embassy Country Team, and as the coordinator of U.S. clandestine intelligence operations in Spain. Accredited as the Agency's representative to [redacted]

4. Subject is an experienced and mature officer, possessing an excellent command of Spanish. Highly motivated, conscientious, and industrious, he readily accepts responsibility and is both thorough and reliable in the execution of his duties. Even tempered and affable, he holds the confidence and friendship of those whom he directs and those to whom he is responsible, and the morale of his station is noticeably high. He is alert to the operational possibilities



14 JUN 1965

SECRET

SECRET

- 2 -

of any given situation, evidences sound and objective judgment, and works well under pressure. He writes lucidly, speaks articulately, and exhibits a high degree of cost consciousness in the use of government funds and property. His delegation of responsibility to others is meaningful and well delineated.

5. Subject's performance has been strong throughout the rating period. He has given the station purposeful direction and competent management and as an effective supervisor who commands the loyalty and respect of those whom he supervises, he has succeeded in obtaining a maximum effort from the station personnel. He enjoys the confidence of the Ambassador and other principal officers of the Embassy, several of whom have expressed their appreciation of subject's work and commented on the value of the station's contribution to the functioning of the Embassy. The fact that the Ambassador arrived in Madrid with definite prejudices regarding the Agency but was of quite another mind upon his departure is testimony to subject's skill and tact.

7. In addition to his considerable executive and liaison duties, subject has carried out the previously cited operational assignments with marked ability. He is a convincing and persuasive agent handler, and his operational reporting is prompt and thorough.

8. The only criticism I would make of subject is that I believe the station should be making a greater effort

Edward Ryan
EDWARD RYAN
Deputy Chief
Western Europe Division

OVERALL PERFORMANCE IN CURRENT POSITION: "S"

COMMENTS OF REVIEWING OFFICIAL:

CONCUR

William D. O'Ryan
William D. O'Ryan, C/WE

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A 1. NAME (Last) NOEL, James (First) A (Middle) 2. DATE OF BIRTH 1911 3. SEX M 4. GRADE 16 5. SD D 6. OFFICIAL POSITION TITLE Chief of Station, Madrid 7. OFF/DIV/RR OF ASSIGNMENT DDP/WE/Iberia 8. CURRENT STATION Madrid 9. CHECK (X) TYPE OF APPOINTMENT: <input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> SPECIAL (Specify): 10. CHECK (X) TYPE OF REPORT: <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE 11. DATE REPORT DUE IN G.P. 12. REPORTING PERIOD (From - to) 1 April 1963 - 31 March 1964				055292			
SECTION B PERFORMANCE EVALUATION W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - <u>Strong</u> Performance is characterized by exceptional proficiency. O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.							
SPECIFIC DUTIES List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 As Chief of Station, Madrid, plans and directs all FI and CA operations within Spain						RATING LETTER P	
SPECIFIC DUTY NO. 2 Supervises Madrid Station and Barcelona Base personnel						RATING LETTER P	
SPECIFIC DUTY NO. 3 Maintains contact with senior officials						RATING LETTER S	
SPECIFIC DUTY NO. 4 Represents the Director of CIA with the Ambassador to Spain and other U.S. officials in Spain						RATING LETTER O	
SPECIFIC DUTY NO. 5 Personally handles several sensitive operations.						RATING LETTER S	
SPECIFIC DUTY NO. 6 Supervises						RATING LETTER O	
OVERALL PERFORMANCE IN CURRENT POSITION Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance. 12 MAY 1964							
						RATING LETTER S	

88P

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS		OFFICE OF PERSONNEL
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>				
<p>Subject is one of the Agency's truly mature, experienced operations officers. He has had unusual operational experience in Central and South America, both in the field and in Headquarters. His activities have spanned both the FI and the CA spectrum. He has and does deal easily and graciously with high ranking officials, both American and foreign. His good sense, poise and dignity never fail to impress. He is a person of principal and high morals. He does not hesitate to express his conviction even though he may have reason to believe such convictions are not popular. He is a strong supervisor who enjoys his subordinate's respect. He is economy minded and made diligent efforts to comply with requests to economize. Mr. Noel has succeeded in creating a cohesive station in Madrid.</p>				
SECTION D CERTIFICATION AND COMMENTS				
1. BY EMPLOYEE				
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT				
DATE	SIGNATURE OF EMPLOYEE			
2. BY SUPERVISOR				
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION			
	Subject is worthy of this report and will be shown to him upon his return.			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE		
20 April 1964	Chief, WE/5	Fred E. Hubbard		
3. BY REVIEWING OFFICIAL				
COMMENTS OF REVIEWING OFFICIAL				
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE		
5 May 1964	C/W/E	W. D. Lyne		

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) NOEL, James A.			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE GS 16	5. SD D	
6. OFFICIAL POSITION TITLE Chief of Station			7. OFF/DIV/BR OF ASSIGNMENT DDP/WE/Iberian Br.		8. CURRENT STATION Madrid		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE				
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P. 22 April 1963			12. REPORTING PERIOD (From - to) 1 April 1962-31 March 1963				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							RATING LETTER
SPECIFIC DUTY NO. 1 Direction of all FI and CA operations.							S
SPECIFIC DUTY NO. 2 Administration of Station and supervision of personnel.							S
SPECIFIC DUTY NO. 3 Direct supervision of senior ops officer							S
SPECIFIC DUTY NO. 4 Personally handles a sensitive operation of interest to another CS component.							S
SPECIFIC DUTY NO. 5 Maintains contact with senior personnel.							S
SPECIFIC DUTY NO. 6 Maintains a working relationship with the Ambassador and other U. S. officials.							S
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER S

30 APR 1963

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Noel has ably administered a large Station and has ^{APR 29 9 51 AM '63} maturity, good judgment and tact in the day-to-day management and direction of Station activities and personnel. This has been achieved despite the physical location of Station staff personnel [redacted]

Under the direction of Mr. Noel a far reaching and fruitful major operational program against the high priority [redacted] has been undertaken and Madrid Station today is making a substantial contribution in good operations and good intelligence information to the over-all Agency effort. Another notable accomplishment directly attributable to Mr. Noel, and in part a reflection of his long years of service in Latin America, has been his professional handling personally of the Station operation involving [redacted]. Interested CS components have stated categorically that Madrid Station coverage of [redacted] and his activities is essential in satisfying existing intelligence requirements on [redacted]

Despite the Station's heavy diversion into [redacted] Latin American activities and [redacted] activities, Mr. Noel has encouraged the development of a long-range program involving activities against the [redacted] Communist Party and clandestine contact with the [redacted] political opposition.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

4 Feb 1964

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION:

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
Subject employee is in the field. Report will be shown to him upon his return to Headquarters.

19

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

April 25/1963

DC/WE

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in the above assessment.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

28 April 1963

C/WE

William E. O'Ryan

SECRET

RYBAT

RECORDED BY
CSFD

17 April 1962

MEMORANDUM FOR: Acting Chief, WE

SUBJECT : Mr. James A. Noel
Fitness Report Covering the Period 14 August 1961 to
31 March 1962

1. Mr. Noel assumed his duties as Chief of Station, Madrid on 23 September 1961. The Station, as constituted when Mr. Noel arrived, included some [redacted] plus numerous contract personnel, as well as a [redacted]. The Madrid Station proper not only includes the Embassy installation but an outside operations section as well. Since Mr. Noel arrived the Station has been launched into a [redacted] operations program of considerable scale and on a crash basis. In addition, in this period, [redacted] and the experienced Chief of [redacted] had to be brought home due to a family emergency.

2. To date Mr. Noel has given every evidence of a particular ability to cope with the crash program and the acute shortage of personnel with judiciousness and maturity. While it is too early, yet, to pass judgement, there are indications that Mr. Noel has been preoccupied [redacted]

[redacted]

3. As indicated above, Mr. Noel has not been in place as Chief of Station long enough to justify firm reservations concerning his management, nor to permit meaningful criticism. Also, as indicated above, his outstanding noticeable strength to date has been his ability to cope with a heavy operational program, a shortage of personnel, and a sometimes difficult operational climate, with judgement, calmness and patience.

Thomas F. Thiele
THOMAS F. THIELE
Chief, WE/5

CONCUR:

William DeLoach WE

RYBAT

William C. Sullivan
William C. Sullivan

CONFIDENTIAL

MEMORANDUM FOR: Director of Personnel
SUBJECT: State Department Promotion of
NOEL, James A.

1. The Department has informed this office that effective
April 1, 1962 subject employee was promoted from
FSR-3, \$13,600 to FSR-2, \$14,900

2. Request this notice be placed in the official folder of
the employee concerned.



cc: Finance Division
Area Division

CONFIDENTIAL

70-4 B of 23

STANDARD FORM 80 JANUARY 1970 U.S. CIVIL SERVICE COMMISSION FPM SUPPLEMENT 870-1 SF-109		AGENCY CERTIFICATION OF INSURANCE STATUS Federal Employees Group Life Insurance Program	
1. NAME (Last) (First) (Middle)		2(a). DATE OF BIRTH (Month, Day, Year)	2(b). SOCIAL SECURITY ACCOUNT NUMBER
NOEL, James A.		19 March 1911	083 36 2388
3. CHECK THE REASON FOR TERMINATING INSURANCE			
(a) <input type="checkbox"/> Separated (includes resignations) (b) <input checked="" type="checkbox"/> Retired (c) <input type="checkbox"/> Died as an employee (d) <input type="checkbox"/> Died as a reemployed annuitant (e) <input type="checkbox"/> End of 12 months non-pay status (f) <input type="checkbox"/> Other (specify)		NOTE: If the reason checked is "b, Retired" your group life insurance (but not accidental death and dismemberment benefits) will continue during retirement if you meet the conditions described in "Notice to Retiring Employee" below.	
4. CHECK APPROPRIATE BOX CONCERNING SF 54, DESIGNATION OF BENEFICIARY			
(a) <input type="checkbox"/> CURRENT SF 54 ATTACHED		(b) <input checked="" type="checkbox"/> A CURRENT SF 54 IS NOT ON FILE WITH THIS AGENCY	(c) <input type="checkbox"/> A CURRENT SF 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)
NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN HIS LIFE INSURANCE, ATTACH CURRENT SF 54, IF ANY, TO ORIGINAL SF 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF SF 56. IF NO CURRENT SF 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT SF 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT SF 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.			
5. DATE OF EVENT (CHECKED IN ITEM 3) (MONTH, DAY, YEAR)	6. ANNUAL BASIC PAY RATE (NOT AMOUNT OF INSURANCE) OR DATE IN ITEM 5. CONVERT DAILY, HOURLY, WEEKLY, ETC. RATE TO ANNUAL RATE.	7. DID EMPLOYEE HAVE OPTIONAL INSURANCE ON DATE IN ITEM 5? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> IF YES, GIVE RECEIPT DATE OF ELECTION OF OPTIONAL INSURANCE (SF 176 or 178-1).	8. DATE OF NOTICE OF CONVERSION PRIOR (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)
31 March 1971	\$33,757 PER ANNUM		
9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5:			
Personal signature of authorized agency official		Name and address of agency, including zip code	
<i>Francis G. Monan</i>		Central Intelligence Agency Washington, D. C. 20505	
Typed name of authorized agency official		Phone number, including area code	
Francis G. Monan			
Title		Date	
Insurance Officer, Alternate		15 APR 1971	

DISCARD COPY OF THIS FORM

SEE OTHER SIDE
FOR
INSTRUCTIONS TO EMPLOYING AGENCY

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
- FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

- 1 FOLLOW THESE GENERAL INSTRUCTIONS:**
- Read the back of the "Duplicate" carefully before you fill in the form.
 - Fill in BOTH COPIES of the form. Type or use ink.
 - Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER		
NOEL	JAMES	ARTHUR	March 19, 1911	083	36	2388
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)			

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☒
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☐
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have this regular insurance.

**4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

James Arthur Noel
DATE
16 February 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

RECEIVED
GENERAL INVESTIGATIVE
DIVISION
MAR 28 1 22 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-T
JAN. 1962
(for use only until April 16, 1968)
176-101

SECRET

26 October 1960

MEMORANDUM FOR: Director of Personnel

SUBJECT: James A. Noel -
Memorandum in Lieu of Fitness Report

Mr. James A. Noel arrived in Havana in September of 1958, a trifle more than three months before Fidel Castro assumed power on 1 January 1959. With the advent of that new government Cuba became, so far as U.S. economic and political interests are concerned, one of the most important spots in the world, as well as increasingly more difficult to conduct CIA business. As a result, with the constant worsening of Cuban-U.S. relationship, it is doubtful that there is at the present time a more difficult assignment than Havana in this Division. Nevertheless, with an extremely limited staff, Noel has been able to continue, and even extend, his operations to the point where almost every [redacted] When the increase of anti-U.S. feeling is considered, to say nothing of the increase of effectiveness [redacted] from its direction [redacted] it is amazing that Noel has been able to produce the great volume of important reports which he has sent. He has conducted some extremely delicate operations in the face of almost certainty of discovery. In all this, however, he has offered leadership of a high quality to his staff and has been a fine example of good morale, which is reflected in the attitude of every member of his staff, all of whom respond readily and without complaint to the demands made of them by their surrounding circumstances. Mr. Noel deserves to be warmly commended for a job well done.

J.C. King
J. C. KING
Chief

Western Hemisphere Division

REVIEWED BY:

W. Lloyd George
Chief of Operations, DD/P

SECRET

DE

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE	
NOEL James A.			19 March 1911		Male	OS-15	
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		
DI		Chief of Station			DDP/WH/III/Havana, Cuba		
8. CAREER STAFF STATUS				9. TYPE OF REPORT			
<input type="checkbox"/> NOT ELIGIBLE		<input checked="" type="checkbox"/> MEMBER		<input type="checkbox"/> DEFERRED		<input type="checkbox"/> INITIAL	
<input type="checkbox"/> PENDING		<input type="checkbox"/> DECLINED		<input type="checkbox"/> DENIED		<input checked="" type="checkbox"/> ANNUAL	
						<input type="checkbox"/> REASSIGNMENT/SUPERVISOR	
						<input type="checkbox"/> REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD				
30 April 1959			From 20 Oct 57 - 31 Mar 59 To				
			SPECIAL (Specify)				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent	
5 - Excellent		6 - Superior		7 - Outstanding			
SPECIFIC DUTY NO. 1			RATING NO.	SPECIFIC DUTY NO. 4			RATING NO.
Direction of FI operations			6	Intelligence evaluation and reporting			6
SPECIFIC DUTY NO. 2			RATING NO.	SPECIFIC DUTY NO. 5			RATING NO.
Direction of PP operations			5	Development of working relationship with indigenous leaders and local Americans			6
SPECIFIC DUTY NO. 3			RATING NO.	SPECIFIC DUTY NO. 6			RATING NO.
Administration of Station and supervisor of personnel			6	Development of working relationship with Ambassador and other US officials			5
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties; productivity; conduct on job; cooperativeness; pertinent personal traits or habits; particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.							
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.						RATING NO. <div style="border: 1px solid black; padding: 5px; text-align: center;">5</div>	
SECTION D DESCRIPTION OF THE EMPLOYEE							
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.							
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree	
5 - Outstanding degree							
CHARACTERISTICS				NOT APPLICABLE	NOT OBSERVED	RATING	
						1 2 3 4 5	
GETS THINGS DONE							
RESOURCEFUL							
ACCEPTS RESPONSIBILITIES							
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE							
WRITES EFFECTIVELY							
SECURITY CONSCIOUS							
THINKS CLEARLY							
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							
OTHER (Specify):							
SEE SECTION "E" ON REVERSE SIDE							

SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Noel was assigned to his post at a time when the country was undergoing a revolution which later was successful. He has done an outstanding job in adapting and redirecting the Station's operational program. He has shown initiative, imagination and resourcefulness in developing new operations, both in the FI and PP fields.

SECTION F

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Employee is in the field

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON:

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

28 May 1959

DC/WH

R. E. GOMEZ

R. E. Gomez

3.

BY REVIEWING OFFICIAL

☒ I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

☐ I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

I concur that Mr. Noel's operational performance under difficult conditions has been outstanding. It should also be noted that he has been highly successful at his present post in getting the best out of his staff.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

28 May 1959

C/WH

J. C. KING

J. C. King

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) NOEL, James A.	2. DATE OF BIRTH 19 March 1911	3. SEX M	4. SERVICE DESIGNATION (DI)
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/WH/II/DC		6. OFFICIAL POSITION TITLE Area Ops Officer - Branch Chief	
7. GRADE GS-15	8. DATE REPORT DUE IN OP 9 November 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 21 Oct 56 - 20 Oct 57	
10. TYPE OF REPORT (Check one) <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify)	11. INITIAL A	12. REASSIGNMENT - SUPERVISOR <input type="checkbox"/>	13. REASSIGNMENT - EMPLOYEE <input type="checkbox"/>

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENT:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN C. OR D, A WARNING LETTER HAS BEEN SENT TO HIM AND A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify)
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THE EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

10. THIS DATE 14 Oct 57	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Donald C. Parelius	D. SUPERVISOR'S OFFICIAL TITLE ADC/WH
-----------------------------------	---	---

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

Period Pos. C. **KN**DATE
25 OCT 1957Reviewed by FUD **14/3/57**☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section:

A. THIS DATE 15 Oct 57	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL J. C. King	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH
----------------------------------	---	---

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D:

5 INSERT RATING NUMBER.	1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
	2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

FORM NO. 45 (Part I)
1 NOV 55REPLACES PREVIOUS EDITIONS
OF FORMS 45 AND 45A WHICH
ARE OBSOLETE.

SECRET

Performance

(4)

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES		OFFICE OF PERSONNEL																									
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during the rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For Supervisors, ability to supervise will always be rated as a specific duty by supervisors those who supervise a secretary only.</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing similar duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERVIEWS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPIST</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR-CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPIST	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR-CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
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CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPIST	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR-CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p> <p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCEEDS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																											
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Direction of Branch	7	Spotting of operational possibilities	6																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Supervision of PI Ops	6	Use of area knowledge	5																								
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Supervision of PP Ops	5	Working relationship with other U. S. officials	5																								
<p>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</p> <p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>This officer has performed in a superior manner during the past year as branch chief of the West and North Coast of South America branch, subsequently of the East Coast branch. His long experience in the field coupled with a flair for intelligence, sound judgement and an ability to organize and efficiently administer his branch make him a valuable asset to the organization. He has markedly improved in his ability to express himself and in his conduct of PP operations.</p>																											
<p>SECTION B. SUITABILITY FOR CURRENT JOB IN ORGANIZATION</p> <p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>																											

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any portion. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OMA no later than 30 days after the due date indicated in item 8 of Section "I" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
NOEL, James A.	19 March 1923	M	(DI)
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
DDP/WH/II/DC	Area Ops Ofcr - Branch Chief		
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (inclusive dates)	
GS-15	9 Nov 1957	21 Oct 56 - 20 Oct 57	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT - SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> A. ANNUAL	<input type="checkbox"/> B. SPECIAL	<input type="checkbox"/> C. REASSIGNMENT - EMPLOYEE	

SECTION F.

CERTIFICATION

FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED.		
A. THIS DATE	B. TYPE OF PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
14 Oct 57	Donald C. McGuffee	ADC/WH
FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
D. THIS DATE	E. TYPE OF PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	F. OFFICIAL TITLE OF REVIEWING OFFICIAL
15 Oct 57	J. C. King	Chief, WH

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5

1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED

2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED

3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES

4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES

5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING

6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL

7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☐ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)		
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	2	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		OTHER (Specify)		

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION					
4. COMMENTS CONCERNING POTENTIAL					
<p>He will be an excellent Station Chief where there are both PP responsibilities.</p> <p>and PP responsibilities.</p>					
<p>Oct 24 2 38 PM '57</p> <p>MAIL ROOM</p>					
SECTION M. FUTURE PLANS					
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL					
Senior staffs					
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS					
none					
SECTION I. DESCRIPTION OF INDIVIDUAL					
<p>DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.</p> <p>X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL</p> <p>CATEGORY NUMBER</p> <p>1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE</p> <p>2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE</p> <p>3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE</p> <p>4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE</p> <p>5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE</p>					
CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. HOLDS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	5	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGEMENT
5	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS JERKABLE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any notation. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
NOEL James A.	19 March 1911	M	DI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
DD/P/WH/Br. I	Area Ops Officer (Branch Chief)		
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (inclusive dates)	
GS-15	1 November 1956	11 October 1955 - 20 October 1956	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT-SUBORDINATE	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ WAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY.

2. CHECK (X) APPROPRIATE STATEMENTS:

<input type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "S" IN CI OR D, A WARNING LETTER HAS BEEN SENT TO HIM & COPY ATTACHED TO THIS REPORT.
<input checked="" type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

3. THIS DATE: 7 DEC 1956

4. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR: Frank M. Holcomb

5. SUPERVISOR'S OFFICIAL TITLE: Deputy Chief/WH

6. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Postel	8 DEC 1956
Reviewed	2 DEC 57

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE: 4 Feb '57	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL: J. C. King	C. OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief/WH
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SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DISPOSITIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5	<ul style="list-style-type: none"> 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT. 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.
---	---

COMMENTS:

SECRET

(When filled in)

OFFICE OF PERSONNEL
FEB 5 2 37 PM '37
MAIL ROOM

2. RATING ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Note performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERVIEWINGS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
Typing	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
- For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

- | | | |
|---------------------------------|---|--|
| DESCRIPTIVE
RATING
NUMBER | 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS |
| | 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY | 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
| | 3 - PERFORMS THIS DUTY ACCEPTABLY | |
| | 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER | |
| | 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | |

SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER
General Management of Branch	5	Spotting operational possibilities	5
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER
Supervision FI Ops	6	Use of area knowledge	5
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER
Supervision FP Ops	4	Coordination other Branches	5

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job. Under his supervision the Branch will do a reliable job without higher echelon direction. His administration is efficient. His inability to express himself in clear, and forceful language is a handicap, particularly in connection with briefings.

In addition to his proven competence as an FI officer he is applying with steadily increasing effectiveness his growing knowledge of the conduct of FP operations.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual... productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.

- | | |
|-----------------------|---|
| 5
RATING
NUMBER | 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED |
| | 2 - OF DOUBTFUL SUITABILITY... SHOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW |
| | 3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION |
| | 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION |
| | 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS |
| | 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION |
| | 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION |

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY: He has at the same time excellent judgment and displays sound thinking at all times; these characteristics, along with his administrative ability, are his distinguishing qualities.

SECRET

SECRET

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL RATING on the employee, however, it MUST be completed and forwarded to the OC no later than 30 days after the due date indicated in item 8 of Section "F" below.

SECTION E.

GENERAL

1. NAME (Last) NOEL (First) James (Middle) A.	2. DATE OF BIRTH 19 March 1911	3. SEX M	4. SERVICE DESIGNATION II
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/WH/Branch I		6. OFFICIAL POSITION TITLE Area Ops Officer (Branch Chief)	
7. GRADE GS-15	8. DATE REPORT DUE IN OF 4 November 1956	9. PERIOD COVERED BY THIS REPORT (inclusive dates) 11 October 1955 - 20 October 1956	
10. TYPE OF REPORT (Check one) <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE	SPECIAL (Specify)		

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE 7 DEC 1956	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Franklin J. King	C. SUPERVISOR'S OFFICIAL TITLE Deputy Chief/WH
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE 4 Feb '57	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL J. C. King	C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief WH

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES	
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels on his kind of work.	
3	1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED 2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED 3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES 4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES 5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING 6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL 7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES
RATING NUMBER	

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him surroundings, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION 1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION 2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION 3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL
3	
3	
	1
	2
3	
3	

DESCRIPTIVE SITUATION

A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisors)

A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)

A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)

WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT

WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION

WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX

OTHER (Specify)

SECRET

Potential

(4)

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION.
30 months

4. COMMENTS CONCERNING POTENTIAL He will be an above-average station chief, particularly in the area of PI missions; he is, as a result of his current Hqs. assignment, showing an increasing comprehension of PP matters, and may in the near future have the opportunity to assume strong PP field responsibilities.

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
PI Staff; however, not in the near future because of the key position he occupies now in this Division.

3. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

None of importance.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER
1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
3	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	4	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBEDIENT	4	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	5	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET
(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It seeks to provide:
1. The agency selection board with information of value when considering the application of an individual for membership in the career service; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current administrative instructions regarding the initiation and transmittal of this report.

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisor to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is essential that you throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows what the standards are.

Reviewed by PUD *[Signature]*

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I (To be filled in by Administrative Officer)

1. NAME (Last)	2. NAME (First)	3. NAME (Middle)	4. DATE OF BIRTH	5. SEX	6. CAREER DESIGNATION
BOEL	James A.		19 March 1911	M	SD-01
7. DATE OF ENTRANCE ON DUTY	8. OFFICE ASSIGNED TO	9. DIVISION	10. BRANCH	11. GRADE	
15 August 1944	DDP	WH	I	GS-0136.01-15	
12. NATURE OF ASSIGNMENT	13. IF FIELD, SPECIFY STATION:	14. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
<input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> FIELD	Caracas, Venezuela	16 July 1954 - 10 October 1955			
15. DATE THAT THIS REPORT IS DUE					
10 October 1955					

SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Branch Chief	20 January 1956
3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS: (List in order of frequency):	
<p>Branch Chief: Under Division Chief, plans and supervises performance of all covert espionage and CE ops, covert political, economic and psychological warfare activities in area of responsibility and the collection of foreign clandestine intelligence in the area. Reviews all projected and current FI and FP operations with desk officers; provides guidance to desk officers on FI and FP ops matters; supervises processing and dissemination of foreign clandestine intelligence information collected in area; makes recommendations to Div. Chief of any change in projects, organization or procedures in order to achieve maximum effectiveness; responsible for general administration and supervision of Branch personnel at Hqs.</p> <p>This officer was Chief of a major station for part of the period under review.</p>	

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consonant with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report ☒ has ☐ has not been shown to the individual rated.

DATE *March 20 '56* NAME AND SIGNATURE OF SUPERVISOR *F.P. [Signature]*

I HAVE REVIEWED THIS REPORT (Comments, if any, are reflected by attached memorandum)

DATE *March 20, 1956* NAME AND SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority) *[Signature]*

FORM NO. 45 REPLACES FORM 37-16 MAY 54
1 OCT 54 WHICH MAY BE USED.

SECRET

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in *most* people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks; this is to allow you to note finer distinctions if you so desire. *38* The statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have *no* opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you *do* have the definite opinion that the description is not at all suited to the individual.

STATEMENTS		CATEGORIES					
		NOT OBSERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X			
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.							X
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.							X
3. CAUTIOUS IN ACTION.						X	
4. HAS INITIATIVE.						X	
5. UNEMOTIONAL.					X		
6. ANALYTIC IN HIS THINKING.						X	
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.						X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.							X
9. HAS SENSE OF HUMOR.						X	
10. KNOWS WHEN TO SEEK ASSISTANCE.						X	
11. CALM.					X		
12. CAN GET ALONG WITH PEOPLE.						X	
13. MEMORY FOR FACTS.						X	
14. GETS THINGS DONE.							X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.							X
16. CAN COPE WITH EMERGENCIES.							X
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.						X	
18. HAS STAMINA: CAN KEEP GOING A LONG TIME.			X				
19. HAS WIDE RANGE OF INFORMATION.						X	
20. SHOWS ORIGINALITY.						X	
21. ACCEPTS RESPONSIBILITIES.							X
22. ADMITS HIS ERRORS.						X	
23. RESPONDS WELL TO SUPERVISION.							X
24. EVEN DISPOSITION.					X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.						X	

SECRET

(When Filled In)

25. CAN THINK ON HIS FEET.
26. COMES UP WITH SOLUTIONS TO PROBLEMS.
27. STIMULATING TO ASSOCIATES: A "SPARK PLUG".
28. TOUGH MINDED.
29. OBEYANT.
30. CAPABLE.
31. CLEAR THINKING.
32. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.
33. EVALUATES SELF REALISTICALLY.
34. WELL INFORMED ABOUT CURRENT EVENTS.
35. DELIBERATE.
36. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.
37. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.
38. THOUGHTFUL OF OTHERS.
39. BOMBS WELL UNDER PRESSURE.
40. DISPLAYS JUDGEMENT.
41. GIVES CREDIT WHERE CREDIT IS DUE.
42. HAS DRIVE.
43. IS SECURITY CONSCIOUS.
44. VERSATILE.
45. HIS CRITICISM IS CONSTRUCTIVE.
46. ABLE TO INFLUENCE OTHERS.
47. FACILITATES SMOOTH OPERATION OF HIS OFFICE.
48. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.

SECCIÓN V

4. WHAT ARE HIS OUTSTANDING STRENGTHS?

Serious approach and dedication to duties. General level of professional competence in FI and CI fields.

2. WHAT ARE HIS OUTSTANDING WEAKNESSES?

His extent of comprehension of FP activities is a weakness only in the sense that his field duties have not offered sufficient opportunity to develop his presumed capability in this field to the point it would compare favorably with his FI ability.

SECRET
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:
Strength: General reliability.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY? MAR 22 9 34 AM '56

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?
Advance PP.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):
His attention to duty has been manifested in steady improvement in regard to major objectives and in a commendable increase of station assets.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES TO SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY. WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY. IRRITATED BY RESTRICTIONS. REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY. BOTHERED BY MINOR FRUSTRATIONS. WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT. HAS "WAIT AND SEE" ATTITUDE. WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY. MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY. THINKS IN TERMS OF A CAREER IN THE AGENCY.
- ☐ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY. DARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.
- ☒ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY. WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

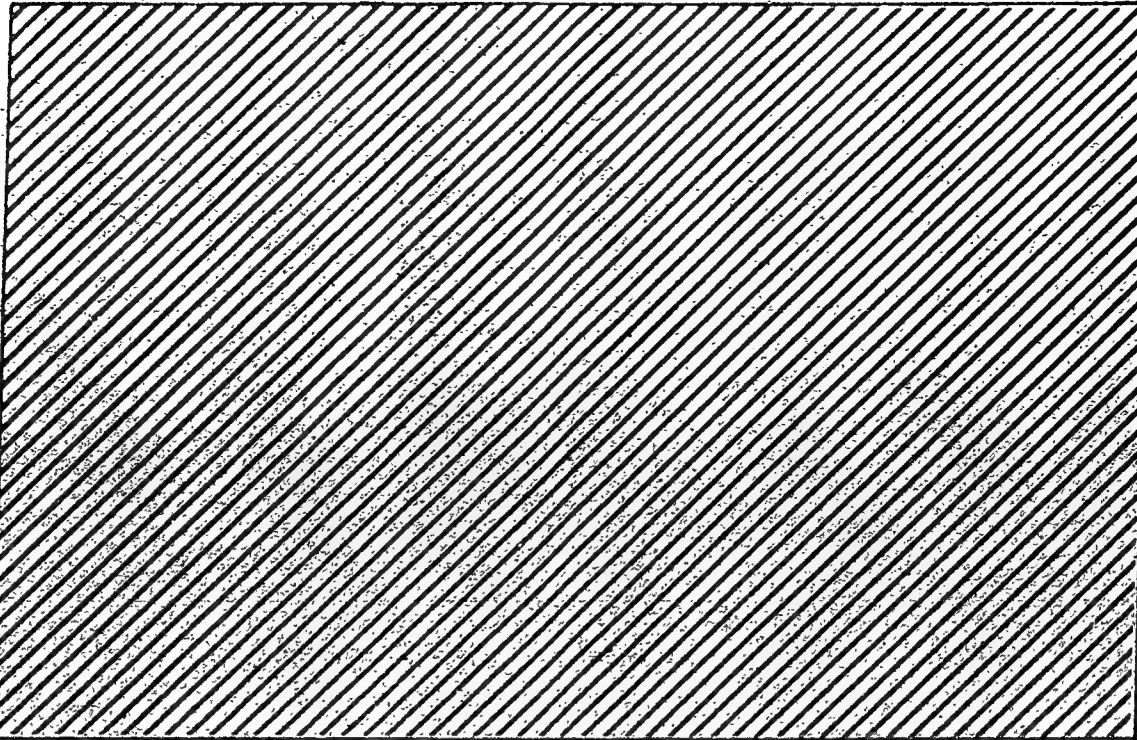
- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☒ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☐ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating. Skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY. WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE. DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE. HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Noel, James A.	Wife-Lillian	67-0415
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>8 August 1966</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BSD REPRESENTATIVE	
2 December 1966		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE	DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
	AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
	NAME OF EMPLOYEE (true)		DATE (from item 3.1)	NAME OF SUPERVISOR (true)
	James Noel		18 Feb. 1963	
DO NOT COMPLETE	NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE		7a. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
19 Mar 1911	GS-16	Chief of Station		23 September 1961
4. SERVICE DESIGNATION (if known)		5. CURRENT STATION OR FIELD BASE		7b. EXPECTED DATE OF DEPARTURE
		Madrid		about 10 June 1964
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR				7c. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None				
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):				
Chief of Station. Overall responsibility for all KUBARK operations and activities in country of assignment.				
9. PREFERENCE FOR NEXT ASSIGNMENT:				
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM 4b, 5, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.				
Return to post for second tour following home leave.				
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):				
None at this time.				

SECRET

D. PREFERENCE FOR NEXT ASSIGNMENT (*continued*)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:

☒ RETURN TO MY CURRENT STATION

☒ BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:
1ST. CHOICE WE 2ND. CHOICE WH 3RD. CHOICE _____

☒ BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:
1ST. CHOICE Nague 2ND. CHOICE Copenhagen 3RD. CHOICE Mexico City

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? _____

INDICATE NUMBER OF WORK DAYS 45

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:

wife; and two sons, ages (at time of contemplated travel - June 1964) 15 and 13.

12A. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT

None - except schooling facilities for children.

13. SIGNATURE: COMPLETE ITEM NO. B-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.

TO BE COMPLETED BY SUPERVISOR AT FIELD STATION

13B. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

14. SIGNATURE: COMPLETE ITEM NO. B-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.

TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

Recommend approval of extension to June 1964. A recommendation regarding a second tour or other assignment will be forwarded to the Panel at a later date.

16. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER DATE <u>11 April 1963</u>	SIG [Signature]
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. _____ CABLE NO. _____
19. TYPED OR PRINTED NAME	20. SIGNATURE
21. TITLE	22. DATE
23. COMMENTS	

DO NOT COMPLETE HERE

SECRET

3 SEP 1960

MEMORANDUM FOR: Director of Personnel

VIA: Deputy Director (Plans)

SUBJECT: Admission

1. An analysis of the compromise and arrest of Agency personnel in Havana on 14 September 1960, originally made by the Chief, Operational Services, and since confirmed by a review committee, assigns to III Division responsibility for command failures in control and supervision of a sensitive operation. I find that the following officers, by reason of the official assignments they then held, could or should have exercised such control and supervision:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

f. James A. Noel as Chief of Station, Havana

[REDACTED]

[REDACTED]

2. This memorandum constitutes an official admission to the above officers, and will be included in their personnel files.

JSA J. C. King

J. C. KING
Chief

Western Hemisphere Division

DDP/BA-C/WH

Distribution:

Orig & 1 - Addressee

1 - ea Personnel File

1 - DD/P

SECRET

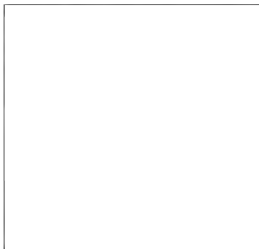
23 January 1959

MEMORANDUM FOR: JAMES A. ROZL

SUBJECT: Commendation for Extraordinary Performance of Duties.

1. It is with great personal satisfaction that I have reviewed the performance of members of this Division and, in particular, your own, during the recent crisis in Cuba. I fully concur with your commendation of various members of your staff, and I am having it made a matter of record in the personnel folder of each employee, together with a supporting comment from the Division. In addition, I wish to single out your own outstanding performance. You have justified our highest estimate of your qualifications at the time of your selection as Chief of Station, Havana. Your consistently sound and intelligent evaluation of the situation, courageous and objective proposals for action, extensive coverage of the various groups involved, immediate and comprehensive reporting, dedication to duty, and leadership, are among the major ingredients of your success.

2. Now that the military phase of the crisis is over, although the political one may linger long, I wish to thank you and the following members of your staff for a superior performance which has been a great credit to all concerned:



W. King
W. C. KING
Chief, WED

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COPY

DEPARTMENT OF STATE
Washington

Bureau of Inspection, Security and Consular Affairs

In reply refer to
SY

31 March 1954

My dear Mr. Dulles:

I should like to express my appreciation to you for the security assistance furnished by your representatives during the Tenth Inter-American Conference at Caracas, Venezuela. Colonel J. C. King, the Head of your Latin American Division and Mr. James A. Noel, your station Chief in Caracas were a tremendous help to us in carrying out our security arrangements for the Conference and for the protection of the Secretary and Conference Delegates.

Colonel King was most cooperative and assisted us greatly during the initial planning of the security and throughout the Conference. The cooperation and advice of Mr. Noel was an invaluable service. Through Mr. Noel's knowledge and contacts our work was greatly facilitated. He consistently made available his time, equipment and the facilities of his office and maintained a close working relationship with our security representatives in Caracas.

Please accept my thanks for the assistance of Colonel King and Mr. Noel and for a job well done.

Sincerely yours,

(Sgd.) Scott McLeod
Administrator

The Honorable
Allen Dulles
Director,
Central Intelligence Agency,
Washington, D. C.

(Original in 201 file of J.C. King)

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SECRET

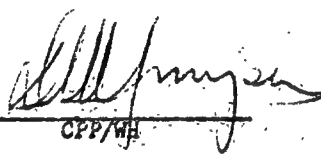
21 January 1954

MEMORANDUM FOR: CWH

File

SUBJECT : Reference to James A. Noel by William I. Clark,
Assistant Director U.S.I.A. for Latin America.

During the briefing of CIA personnel conducted by William I. Clark, Assistant Director of U.S.I.A. for Latin America, on 14 January 1954, he twice referred to the excellent cooperation between our Chief of Mission at Caracas, James A. Noel and the P.A.O., which he characterized as exemplary and a model for all other stations.


CWP/WH

Distribution:

Original and 1: Addressee

SECRET

Office Memorandum • UNITED STATES GOVERNMENT

TO : Chief, FBT

DATE: 30 June 1949

FROM : Commo

SUBJECT: Training

Mr. James A. Noel was given the training course, "Basic Familiarization in Sound and Surveillance Equipment."

This training was given on June 28, 1949 in the Commo Demonstration Room, 1003A "L" Building and was of two hours duration.

file m-6

SECRET
SECURITY INFORMATION

MAR 20 1952

MEMORANDUM FOR: THE SECRETARY OF STATE

ATTENTION : Mr. W. Park Armstrong, Jr.

SUBJECT : NOEL, James Arthur

REFERENCE : Appendix E-4 to Memorandum of 23 November 1951
Subject, Representation in Foreign Service
Missions

ENCLOSURES : a. Application Forms 57 and DAP-36
b. Medical Forms 88 and 89
c. Occupational History Supplement
d. Proposed Biography

3. It is requested that subject arrive at his destination on or about 15 May 1952.

Richard Hales
for
LYMAN B. KIRKPATRICK
Assistant Director

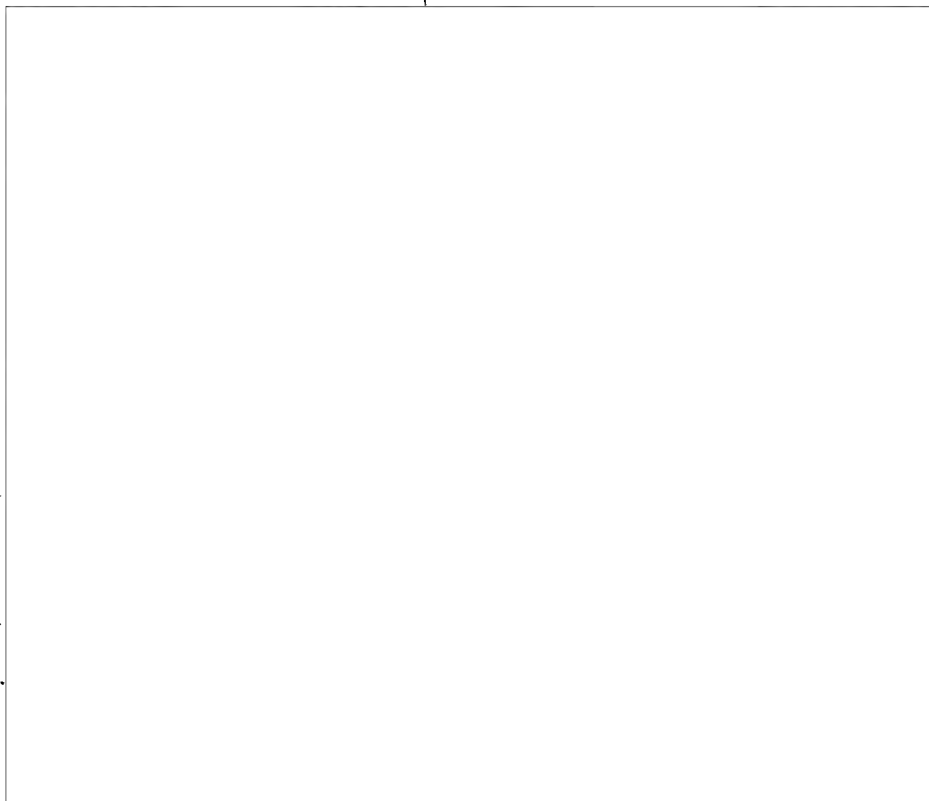
SECRET
SECURITY INFORMATION

JAMES ALTHAM BOZEL



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SECURITY INFORMATION



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(When Filled In)

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QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Note that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I		BIOGRAPHIC AND POSITION DATA				
EMP. SER. NO. 055292	NAME (Last-First-Middle) NOEL James Arthur			DATE OF BIRTH 19 March 1911		
SECTION II						
EDUCATION						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED		ADDRESS (City, State, Country)		YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
SECTION III						
MARITAL STATUS						
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:						
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)						
3. DATE OF BIRTH		4. PLACE OF BIRTH (City, State, Country)				
5. OCCUPATION		6. PRESENT EMPLOYER				
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S) COUNTRY(IES)			9. DATE U.S. CITIZENSHIP ACQUIRED	
SECTION IV						
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE						
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS		
1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE						
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE						

FORM 444n
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EXCLUDED FROM AUTOMATIC
DOWNGRADING AND DECLASSIFICATION

15 AUG 1968

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(When Filled In) P. 1 of 1

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR PERIOD OF KNOWLEDGE	DATE OF ACQUISITION	KNOWLEDGE ACQUIRED BY - CHECK (X)			
				RECEIVED	TRAVEL	STUDY	WORK ASSIGNMENT
1.		1941-42	2-3-1943				
2.		1941-42	2-3-1943				

SECTION VI TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (WPM)	2. SHORTHAND (WPM)
3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM	
<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPHY <input type="checkbox"/> OTHER SPECIFY:	

SECTION VII SPECIAL QUALIFICATIONS	
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.	

SECTION VIII MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<input type="checkbox"/> YES <input type="checkbox"/> NO	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON
MILITARY RESERVE, NATIONAL GUARD STATUS	
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD	
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK
3. EXPIRATION DATE OF CURRENT OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY	
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active) <input type="checkbox"/> STANDBY (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED	
5. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
DATE COMPLETED	
RESIDENT	
AGENCY-SPONSORED	

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM TO
1.		
2.		
3.		

SECTION X REMARKS	

DATE	SIGNATURE OF EMPLOYEE
2 May 1968	<i>[Signature]</i>

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QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION I				
BIOGRAPHIC AND POSITION DATA				
1. EMP. SER. NO.	2. NAME (Last First Middle)	3. SEX	4. DATE OF BIRTH	5. SOURCE GRADE STEP
089292	JOEL JAMES A	M.	03/19/11	GS--16-05
6. SO	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country City)	
D	CHIEF OF BASE	DOD	SAN FRANCISCO, CALIFORNIA	

SECTION II			
AGENCY OVERSEAS SERVICE			
AREA	TYPE TOUR	FROM	TO
GUATEMALA	PCS :CC	47/09/18	49/07/81
ARGENTINA	PCS :CC	49/08/01	52/08/81
VENEZUELA	PCS :VV	52/09/03	55/12/82
SOUTH AMERICA	TDY :CC	56/06/01	56/07/81
SOUTH AMERICA	TDY :CC	57/02/01	57/02/81
SOUTH AMERICA	TDY :CC	57/11/01	57/12/81
CUBA	PCS :VV	58/09/04	61/01/87
SPAIN	PCS	61/09/21	66/07/09

OVERSEAS DATA
CODED
DATE: 29 JUN 67
INITIALS: JPS

SECTION III			
EDUCATION			
DEGREE	MA OR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			
NO COLLEGE DEGREE			

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GROUP 1
Excluded from automatic
downgrading and declassification

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When Filled In:

SECTION III		EDUCATION (Cont'd)				
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED San Diego Senior High School		ADDRESS (City, State, Country) San Diego, California		YEARS ATTENDED From To 1927-29		GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM - TO -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM / QTR HRS (Specify)
	MAJOR	MINOR				
1 NONE						
2						
3						
4						
5. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT. NONE						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
OTHER, NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
4						
5						
AGENCY-SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
4						
5						

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- 2 -

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(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF VISIT	KNOWLEDGE ACQUIRED BY			CHECK IN WORK ASSIGNMENT
				PCO OFFICE	TRAVEL	STUDY	
MEXICO (West Coast)	Political, economic, topographic, cultural	Jan. 1944 to Aug. 1944	-----	X			X
SPAIN	Political, economic, topographic, cultural	Sept. 1944 to Feb. 1946	-----	X			X
GUATEMALA	Political, economic, topographic, cultural	Apr. 1947 to May 1949	-----	X			X
ARGENTINA	Political, economic, cultural	Aug. 1949 to Dec. 1951	-----	X			X
VENEZUELA	Political, economic, cultural	Aug. 1952 to Dec. 1955	-----	X			X
CUBA	Political, economic, topographic, cultural	Sept. 1958 to Jan. 1961	-----	X			X
SPAIN	Political, economic, topographic, cultural	Sept. 1961 to July 1966	-----	X			X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 60	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED. CHECK IN APPROPRIATE ITEM. <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> SIENOTYPE <input type="checkbox"/> OTHER: _____	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comptometer, micrograph, card punch, etc.) NONE			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. Collector contemporary Spanish art.	
2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (include CW speed, loading & servicing), OFFSET PRESS, TURFET LATHE, EDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES. None	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number if known)	5. FIRST LICENSE/CERTIFICATE (year of issue) 6. LATEST LICENSE/CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION, DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.) NONE	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED NONE	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE NONE	

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SECTION VII			
MILITARY SERVICE			
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT?		2. SELECTIVE SERVICE CLASSIFICATION	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		4. IF DEFERRED, GIVE REASON	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc. - specify)	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty)	
NONE		FROM TO	
4. STATUS (Regular, Reserve, etc. - specify)	5. RANK, GRADE OR RATE (at separation if past service)	6. SERIAL, SERVICE OR FILE NUMBER	
7. CHECK TYPE OF SEPARATION			
<input type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> UNDEE MARDSHIPS <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> RETIREMENT FOR AGE <input type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (record the duties and skills which best describe your work or function in the military service)			
NONE			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG			
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT TO CURRENT RANK	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY			
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (record the duties and skills which best describe your work or function in the military service)			
NONE			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS.			
NONE			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION	DATE COMPLETED
1. NONE			
2.			
3.			
4.			
5.			
			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED

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Figure 7

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PERSONNEL TRIPAL NO. 335292		CERTIFICATION FOR LANGUAGE AWARD				LC NO.	
1. NAME (Last, First, Middle) NOEL JAMES BIRCHALL				2. DATE OF BIRTH (Month, Day, Year) MARCH 17, 1911			
3. CAREER STATUS YES		4. SS FI		5. COMPONENT WHB/CHN II			
6. LANGUAGE SPANISH		CODE 720		7. DATE OF TEST (Month, Day, Year) APRIL 7, 1958		8. ANNIVERSARY DATE (Month, Day, Year) April 25, 1957	
9. TEST WR		READING H		WRITING I		PRONUNCIATION I	
10. SPEAKING H		11. LISTENING H		12. UNDERSTANDING I		13. NOT QUALIFIED AT ANY LEVEL	
14. AVAILABLE LEVEL		COMPREHENSIVE		SPECIALIZED-READING		SPECIALIZED-SPEAKING	
ELEW.		ENTER.		HIGH		ELEW.	
ENTER.		HIGH		ELEW.		ENTER.	
HIGH		ELEW.		ENTER.		HIGH	
15. I CERTIFY THAT THE ABOVE NAMED EMPLOYEE IS ELIGIBLE FOR THE AWARD INDICATED, HAVING MET ALL THE REQUIREMENTS FOR SAID AWARD.				16. TYPE OF AWARD			
DATE				SIGNATURE			
AMOUNT OF AWARD \$100.00				CHARGE ALLOTMENT NO.			
DATE				DATE			
17. FEDERAL TAX DEDUCTION				18. EMPLOYEE PAYROLL NO.			
19. STATE/DC TAX DEDUCTION				20. ALLOTMENT OF ASSIGNMENT			
21. NET AMOUNT OF AWARD PAID				22. CHECK NUMBER ISSUED			
DATE				DATE			
23. FORWARD CHECK TO: FIRST NATIONAL BANK, 510 WASHINGTON ST., NEW YORK, N.Y.							

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U.S. GOVERNMENT PRINTING OFFICE: 1957

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PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE SEP
INSTRUCTIONS		
This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.		
SECTION I		
1. FULL NAME (Last-First-Middle) NOEL, James Arthur		
2. CURRENT ADDRESS (No., Street, City, Zone, State) 5528 Uppingham Street Somerset Chevy Chase 15, Maryland		3. PERMANENT ADDRESS (No., Street, City, Zone, State) 3506 Juniper Street San Diego 4, California
4. HOME TELEPHONE NUMBER OLIVER 4-3809	5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE California	
SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (Last-First-Middle) PREVIOUSLY RESIDING IN U.S. NOEL, Lillian Bobbett		2. RELATIONSHIP Wife
3. HOME ADDRESS (No., Street, City, Zone, State, Country) 5528 Uppingham Street, Chevy Chase 15, Maryland		
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE -----		
5. HOME TELEPHONE NUMBER Oliver 4-3809	6. BUSINESS TELEPHONE NUMBER none	7. BUSINESS TELEPHONE EXTENSION none
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE. Alfred E. NOEL (father), 1714 Dale Street, San Diego 2, California		
SECTION III MARITAL STATUS		
1. CHECK (X) ONE: <input checked="" type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED		
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS none		
SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancé.		
3. NAME (First) (Middle) (Maiden) (Last) Lillian Edith Bobbett NOEL		
4. DATE OF MARRIAGE 29 Sept. 1934	5. PLACE OF MARRIAGE (City, State, Country) San Diego, California	
6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country) 3614 Fairmount Avenue, San Diego, California		
7. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	8. DATE OF DEATH	9. CAUSE OF DEATH
10. CURRENT ADDRESS (Give last address, if deceased) 5528 Uppingham Street, Chevy Chase 15, Maryland		
11. DATE OF BIRTH 12 January 1911	12. PLACE OF BIRTH (City, State, Country) Colorado Springs, Colorado	
13. IF BORN OUTSIDE U.S., DATE OF ENTRY N.A.	14. PLACE OF ENTRY N.A.	
15. CITIZENSHIP (Country) U.S.A.	16. DATE ACQUIRED birth	17. WHERE ACQUIRED (City, State, Country) birth in U.S.
18. OCCUPATION Housewife	19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers) N.A.	
20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country) N.A.		

SECTION III CONTINUED TO PAGE 2

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(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE OF SPOUSE (From and To) BY MONTH AND YEAR
N.A.22. BRANCH OF SERVICE
N.A.23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED
N.A.

24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN

Clerk in U.S. Consulate, Ensenada, B.C., Mexico, from 1935-37.

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1. FULL NAME (Last-First-Middle) NONE	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES		

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.		
3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.		
5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS. None		

SECTION V CONTINUED TO PAGE 3

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SECTION V CONTINUED FROM PAGE 2							
6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS							
NAME OF INSTITUTION			ADDRESS (City, State, Country)				
Bank of Bethesda (checking account)			Bethesda, Maryland				
1st National Bank (checking account)			5th & Edwy, San Diego, California				
7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)							
N.A.							
SECTION VI: CITIZENSHIP							
1. COUNTRY OF CURRENT CITIZENSHIP United States			2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE: <input checked="" type="checkbox"/> BIRTH <input type="checkbox"/> MARRIAGE <input type="checkbox"/> OTHER (Specify)				
3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			4. GIVE PARTICULARS				
5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (First papers, etc.)							
SECTION VII: No changes since 2000 EDUCATION							
1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED:							
LESS THAN HIGH SCHOOL GRADUATE			OVER 120 YEARS OF COLLEGE, NO DEGREE				
HIGH SCHOOL GRADUATE			BACHELOR'S DEGREE				
TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE			GRADUATE STUDY LEADING TO HIGHER DEGREE				
TWO YEARS COLLEGE OR LESS			MASTER'S DEGREE				
			DOCTOR'S DEGREE				
2. COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/QUA HRS. COMPLETED (Specify)
	MAJOR	MINOR	FROM	TO			
3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS			
		FROM	TO				
4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)							
NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL WEEKS			
		FROM	TO				
5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE							

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(When Filled In)

SECTION VIII GEOGRAPHIC AREA KNOWLEDGE						
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT OTHER THAN ORGANIZATION EXPERIENCE. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE," INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY			
			RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Mexico	Political, economic, terrain, people	Jan. 1931 to Aug. 1944				X
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE Mexico - duty with U.S. Foreign Service, State Department.						
3. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF ORGANIZATION ASSIGNMENT OR ACTIVITY:						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY			
			HQTS ASSIGNMENT	FIELD ASSIGNMENT	TRAINING	
Spain	Terrain, indigenous psychology, pol. parties	Sept. 1944 thru Feb. 1947		X		
Guatemala	Terrain, sol. personalities, economic sit.	April 1947 thru April 1949		X		
Argentina	Political parties & personalities	August 1949 thru November 1951		X		
Venezuela	Political parties & personalities, industries	September 1952 to Nov. 1955		X		
Colombia, Ecuador, Peru, Chile and Bolivia	Pol. parties & figures	June-July 56 Feb. 1957	X TDY			

SECTION IX TYPING AND STENOGRAPHIC SKILLS				
1. TYPING (W.P.M.) 60	2. SHORTHAND (W.P.M.)	3. SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM		
		GREGG	SPEEDWRITING	STENO TYPE
OTHER (Specify):				
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Comptometer, Mimeograph, Card Punch, etc.)				

SECTION X SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH No changes since last report.	
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK	
3. EXCLUDING EQUIPMENT NOTED IN SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTWAVE RADIO, MULTILITH, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.	
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF KNOWN.	
5. FIRST LICENSE OR CERTIFICATE (Year of issue)	6. LATEST LICENSE OR CERTIFICATE (Year of issue)

SECRET

SECRET
(When Filled In)

SECTION X CONTINUED FROM PAGE 8

1. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

2. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

3. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

4. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
April 1947 to April 1949	GS-12	DDP/ WH Division
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
2	Chief of Station, Guatemala City, Guatemala	
6. DESCRIPTION OF DUTIES		
Responsibility for the administration and operations of a field station. Opened our Station at Guatemala City. Established and maintained relations with other U.S. officials and agencies. Agent development and handling.		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
August 1949 to Nov. 1951	13-14	DDP/ WH Division
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
8	DCOM & later Chief of Mission, Buenos Aires, Argentina	
6. DESCRIPTION OF DUTIES		
Chief of Station. Supervision of all station activities. Planning and execution of field operations. Maintenance of liaison with Ambassador and other U.S. officials. Agent handling.		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Sept. 1952 to Nov. 1955	14-15	DDP/ WH Division
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
10	Chief of Station, Caracas, Venezuela	
6. DESCRIPTION OF DUTIES		
Chief of Station. Supervision of all station activities. Liaison with Amb. & other U.S. agencies. Planning & execution of field ops. Agent handling.		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
January 1956-June 1957	GS-15	DDP/WH Division, Branch I
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
21	Chief of Branch	
6. DESCRIPTION OF DUTIES		
Consulting senior staff & other components; briefing of Ambassadors & other officials.		
1. INCLUSIVE DATES (From and To)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
June 3, 1957 to date	GS-15	DDP/WH Divisio, Branch II
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
from 20 to 25	Chief of Branch	
6. DESCRIPTION OF DUTIES		
As indicated in 4 above Division Chief for efficient handling of op matters relating to Responsible to		

SECRET

SECRET

(When Filled In)

OFFICE OF THE

SECTION XII		CHILDREN AND OTHER DEPENDENTS				
1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.		2		3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepchildren, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN UNDER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.		
3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS						
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS
			M	F		
Millian B. NOEL	wife	1911		x	U.S.	5528 Uppingham St. Chevy Chase 15, Md.
	son	1948	x		U.S.	same
	son	1951	x		U.S.	same

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

Continuation Section VIII, 3.

In addition to the countries listed, I have traveled on TDY assignments to:

- January 1953
- Aug. 7 1955
- Cuba - Nov. 1953 and in Nov. 1956
- Panama - May 1948
- Costa Rica - May 1948
- Venezuela - July 1956

various during period Sept. 52-Nov. 55.

I have visited or transited every country of the Western Hemisphere

DATE COMPLETED
12 October 1957

SIGNATURE OF EMPLOYEE
James A. NOEL

SECRET

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the

instructions on the announcement card regarding disposition of this application. If you are applying for an INTERVIEW examination, send this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

APPLICATION NO.		NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR		DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only	
1. OPTION: (if mentioned in examination announcement)		2. PLACE OF EMPLOYMENT APPLIED FOR (City and State)		3. DATE OF THIS APPLICATION	
		Foreign Service		10 Mar. 1952	
4. MR. (First name) (Middle) (Maiden, if any) (Last)		5. (A) STREET AND NUMBER OR R. D. NUMBER		6. CITY OR POST OFFICE (including postal zone) AND STATE	
James Arthur NOEL		511 Alban Towers, 3700 Massachusetts, N.W.,		Washington, D.C.	
7. LEGAL OR VOTING RESIDENCE (State)		8. (A) OFFICE PHONE		9. HOME PHONE	
California		-		Woodley 6400 Ext. 511	
10. DATE OF BIRTH (month, day, year)		11. PLACE OF BIRTH (City and State; if born outside U. S., name city and country)		12. (A) HEIGHT WITHOUT SHOES	
March 19, 1911		New York City, New York		6 FEET 0 INCHES	
13. (A) MALE		14. (A) WEIGHT		15. (A) MARIED	
FEMALE		200 POUNDS		SINGLE	
16. (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		17. (B) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED.		18. (C) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS.	
(B) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE		(C) IN WASHINGTON, D. C. <input type="checkbox"/> ANYWHERE IN THE UNITED STATES <input type="checkbox"/>		(D) OUTSIDE THE UNITED STATES <input type="checkbox"/>	
FAS-4 \$6,990. May 2, 1949		(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS.			
19. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ PER YEAR		(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED FOR		(C) IF YOU ARE WILLING TO TRAVEL SPECIALLY	
You will not be considered for any position with a lower entrance salary		1 TO 3 MONTHS <input type="checkbox"/> 3 TO 6 MONTHS <input type="checkbox"/> 6 TO 12 MONTHS <input type="checkbox"/>		OCCASIONALLY <input type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY <input type="checkbox"/>	
NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.		20. (A) EXPERIENCE: It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Black with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, military, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.		(B) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.	
(C) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."					
21. PRESENT POSITION		22. (A) DATE OF EMPLOYMENT (month, year)		23. EXACT TITLE OF YOUR PRESENT POSITION	
		FROM		Unemployed	
24. PLACE OF EMPLOYMENT (city and State)		25. NAME AND TITLE OF IMMEDIATE SUPERVISOR		26. CLASSIFICATION GRADE (if in Federal Service)	
27. NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		28. KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)		29. SALARY OF EARNINGS, STARTING \$ PER CENT \$ PER PER	
30. NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU		31. REASON FOR DESIRING TO CHANGE EMPLOYMENT		32. DESCRIPTION OF YOUR WORK	
				I left the Foreign Service in Dec. 1951 with the intention of entering private business in California in company with my oldest brother and other close relations. A few months trial convinced me that I would not be happy away from Foreign Service work, in which I have spent my entire adult life, and I therefore am anxious to return to government foreign service as soon as it is possible for me to do so.	

(CONTINUED ON NEXT PAGE)

16-62546-2

10- CONTINUED

James Arthur NOEL
511, Alban Towers,
3700 Mass. Ave., N.W.
Washington, D.C.

Birth: March 19, 1911.

Application for Federal Employment

<u>Date of Employment</u>	<u>Exact Title of Position</u>	<u>Salary</u>
Jan. 1931 to Oct. 1938	Vice Consul	Starting: \$1,800. p.a. Final 2,000. p.a.

<u>Place of Employment</u>	<u>Name of Immediate Supervisor</u>
Ensenada, Mexico	Wm. A. Smale, Consul

<u>Name and Address of Employer</u>	<u>Reason for Leaving</u>
State Department, Foreign Service	transfer to Mazatlan

Number and kind of employees supervised

Two consular clerks

Description of Work

General consular work including shipping services, visas, passports, welfare and protection, agricultural reporting, drafting of replies to trade inquiries.

10-53240-1

U. S. GOVERNMENT PRINTING OFFICE: 1914 - O 88287 16-53246-1

FORM 57-54 1-26-51 DEPARTMENT OF STATE APPLICATION FOR FOREIGN SERVICE AND DEPARTMENTAL EMPLOYMENT <i>(Use with Standard Form 57)</i> If more space is required, use additional sheets of paper. Write on each sheet your name, address and date of birth. Identify each item, and attach to this application.		BUDG. BAW NO. 47-8072-2 APPROX. EXPIRES August 31, 1954 1. a. NAME (Print) James Arthur NOEL b. ADDRESS 511, Alban Towers, 3700 Mass., N.W., Washington, D.C.		
2. USE OF APPLICATION - Check one box below to indicate whether you wish this application to be considered for Foreign Service employment only, or for both Foreign Service and Departmental employment. Completion of this form is not required for Department employment only. Standard Form 57 must be filled out in any case. <input checked="" type="checkbox"/> FOREIGN SERVICE ONLY <input type="checkbox"/> FOREIGN SERVICE AND DEPARTMENTAL				
3. PERMANENT ADDRESS (Place from which you will expect transportation of self and household effects, if any, if appointed to the Foreign Service) San Diego, California				
4. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? IF A NATURALIZED CITIZEN, GIVE PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. (Section 11 on Form 57). Not applicable				
5. a. ARE YOU NOW INVOLVED IN ANY LITIGATION OR SEPARATION AGREEMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO b. DO YOU KNOW OF ANY PROSPECTIVE LITIGATION IN WHICH YOU MAY BE INVOLVED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Give details, if answer is yes to a. or b.)				
6. WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT FOR OVERSEAS EMPLOYMENT? (Exclusive of allowances) \$ _____ PER YEAR				
7. WHAT RESTRICTIONS ARE THERE, IF ANY, ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD? None				
8. a. FULL NAME OF SPOUSE (if wife, give maiden name) Lillian Bobbett NOEL		b. DATE OF BIRTH January 12, 1911		
		c. PLACE OF BIRTH (City, State or Province, and Country) Colorado Springs, Colo.		
d. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? not applicable		e. IF NATURALIZED, GIVE PLACE, DATE, AND NO. OF NATURALIZATION CERTIFICATE. not applicable		
9. NAMES OF DEPENDENTS RELATIONSHIP DATE OF BIRTH WILL RESIDE WITH YOU OVERSEAS				
Lillian Bobbett Noel		wife	Jan. 12, 1911	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
James A. Noel, Jr.		son	Nov. 3, 1948	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Richard A. Noel		son	April 30, 1951	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
10. a. FATHER'S NAME		b. PRESENT ADDRESS		c. PLACE OF BIRTH
Alfred E. NOEL		1714 Dale St, San Diego, Calif.		Plainfield, N.J.
11. a. MOTHER'S NAME (Maiden)		b. PRESENT ADDRESS		c. PLACE OF BIRTH
Ethel Louise LEACOCK		deceased		New York City, N.Y.
12. IF PARENTS BORN OUTSIDE THE UNITED STATES, DID THEY EVER OBTAIN UNITED STATES CITIZENSHIP? (Check below)				
FATHER		MOTHER		
<input type="checkbox"/> YES H.A. <input type="checkbox"/> NO		<input type="checkbox"/> YES H.A. <input type="checkbox"/> NO		
13. HAVE YOU EVER APPLIED FOR A POSITION WITH THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION WITH THE DEPARTMENT OF STATE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If "Yes" give date, nature of position applied for, and kind of examination taken, if any.				
I was employed in the Foreign Service of the State Department from January 26, 1931 to December 1951.				

NAME		RELATIONSHIP	ADDRESS
None			

15. FOREIGN LANGUAGES (Indicate item 18 on Form 57)
Rate and indicate the extent of your competence, i.e. Excellent, Good, Fair

A. LANGUAGE	B. READ	C. WRITE	D. SPEAK	E. UNDERSTAND
Spanish	Excellent	Good	Good	Excellent

16. LIST PRESENT OR FORMER FOREIGN CONNECTIONS

A. BUSINESS
 B. EMPLOYMENT
 C. MILITARY

U.S. Foreign Service from Jan. 26, 1931 to Dec. 1951.

17. DATES AND PLACES OF RESIDENCE FOR LAST 10 YEARS

DATES	STREET AND NUMBER	CITY	STATE OR COUNTRY
1941-1944	Ave. del Boque 369	Omitzajalera	Mexico
1944-1946	Various	Bilbao, Madrid, Barcelona	Spain
1947-1949	1 ^a Calle y 2 ^a Avenida	Guatemala City	Guatemala
1949-1951	Ave. Aguirre 52	San Isidro (Buenos Aires)	Argentina
1951 (Dec)			California

18. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBTS INCURRED? ☐ YES ☒ NO
 IF "NO," STATE INFORMATION REQUESTED BELOW:

NAMES OF CREDITORS	AMOUNTS DUE	DATES ON WHICH OBLIGATIONS WERE CONTRACTED
None		

19. HAVE YOU EVER BEEN MEDICALLY DISCHARGED FROM THE ARMED SERVICE? ☐ YES ☒ NO
 IF "YES," GIVE DETAILS IN ITEM 39 OF FORM 57.

20. PRESENT MILITARY STATUS

A. ARE YOU REGISTERED WITH A SELECTIVE SERVICE BOARD? ☐ YES ☒ NO IF "YES," STATE BELOW THE NUMBER AND ADDRESS OF THE BOARD, AND YOUR CLASSIFICATION:

B. DO YOU HAVE A MILITARY RESERVE STATUS? ☐ YES ☒ NO IF "YES," STATE BELOW, THE BRANCH OF SERVICE, YOUR RESERVE NUMBER, YOUR ORDER NUMBER, UNIT AND HEADQUARTERS.

21. LIST OTHER NAMES, IF ANY, BY WHICH YOU HAVE BEEN KNOWN, INCLUDING MARRIED NAMES, IF MARRIED MORE THAN ONCE, GIVING DATE DURING WHICH NAMES WERE USED. DO NOT DUPLICATE INFORMATION SUPPLIED IN ITEM 16 ON FORM 57.

None

22. HAVE YOU EVER BEEN IN THE CIVIL SERVICE RETIREMENT SYSTEM? ☐ YES ☒ NO
 Subject to C.S. Retirement Act

23. SOCIAL SECURITY NUMBER, IF ANY:

24. If you believe the information you have supplied on this application does not fully show your qualifications for Foreign Service Employment, state in Item 39 of Form 57 or on a separate sheet, any additional appropriate data that you wish to have considered.

DATE: **March 10, 1952** SIGNATURE: *[Signature]*

James Arthur NOEL
511, Alban Towers,
3700 Mass. Ave., N.W.
Washington, D.C.

Birth: March 19, 1911.

Application for Federal Employment

<u>Date of Employment</u>	<u>Exact Title of Position</u>	<u>Salary</u>
Jan. 1931 to Oct. 1938	Vice Consul	Starting: \$1,800. p.a. Final 2,000. p.a.

<u>Place of Employment</u>	<u>Name of Immediate Supervisor</u>
Ensenada, Mexico	Wm. A. Smaile, Consul

<u>Name and Address of Employer</u>	<u>Reason for Leaving</u>
State Department, Foreign Service	transfer to Mazatlan

Number and kind of employees supervised

Two consular clerks

Description of Work

General consular work including shipping services, visas, passports, welfare and protection, agricultural reporting, drafting of replies to trade inquiries.

Jan. ...thur NOEL

⑤ DATES OF EMPLOYMENT (month, year) FROM Oct. 1938 TO Aug. 1944		EXACT TITLE OF YOUR POSITION Vice Consul		CLASSIFICATION (if in Force) SALARY OR EARNINGS STARTING \$ 2,250 PER MONTH FINAL 3,000	
PLACE OF EMPLOYMENT (city and State) (MEXICO) Matatlan and Guadalajara		NAME AND TITLE OF IMMEDIATE SUPERVISOR Rufus H. Lene, Jr. and Maurice L. Stafford, Consuls			
NAME AND ADDRESS OF EMPLOYER (Govt., organization, or person; if Federal, name department, bureau or establishment, and division) State Department, Foreign Service		KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale and retail trade, manufacture of goods, etc.) government			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU 2 cons. clerks		REASON FOR LEAVING transfer to Bilbao			
DESCRIPTION OF YOUR WORK consular officer in charge of all immigration work at these two consulates, as well as shipping, notarial services, passport and citizenship work, welfare and protection activities, also engaged in economic and political reporting at these posts. In charge of both consulates for prolonged periods during absence of principal officer.					
If more space is required, use a continuation sheet (Standard Form No. 28) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.					
17. MILITARY TRAINING. In the space below, describe any training received in the Armed Services (not already listed under item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service which you attended is especially important. (Extra page may be used to give full descriptions.)					
DATES FROM TO		LOCATION		DESCRIPTION OF TRAINING	
				None	
18. EDUCATION (Circle highest grade completed): 1 2 3 4 5 6 7 8 9 10 11 12					
MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF: <input type="checkbox"/> ELEMENTARY SCHOOL <input type="checkbox"/> JUNIOR HIGH SCHOOL <input checked="" type="checkbox"/> SENIOR HIGH SCHOOL					
(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY			(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED San Diego Senior High School, San Diego, Calif.		
(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS None			(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED History, Economics, commercial law, Spanish		
(D) LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS None			(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED History, Economics, commercial law, Spanish		
(10) OTHER TRAINING. SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (show name and location of school) OR IN SERVICE TRAINING IN PUBLIC OR PRIVATE EMPLOYMENT None					
19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES		22. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER IN ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO GIVE KIND OF LICENSE AND STATE: FIRST LICENSE OR CERTIFICATE (YEAR)			
Spanish		23. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:			
20. IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY, INDICATE (1) NAMES OF COUNTRIES (2) DATES AND LENGTH OF TIME SPENT THERE, AND (3) REASON OR PURPOSE (e.g., military service, business, pleasure)		21. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:			

24 PRESENTING List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under item 16 (EXPERIENCE).		PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION
1.	Gordon B. Dunlap	321 Corona Street, San Antonio, Tex.	Motion Picture Distributor
2.	Lee R. Bloha	903 N. Canal, Carlsbad, New Mexico	Retired PSO
3.	H. B. Gregory	1700 Shroyer Road, Dayton, 9, Ohio	Official, Nat. Cash Register

25. STATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	26. INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
25. HAVE YOU, BY WAY OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in item 39.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? If your answer is "Yes," show in item 39 for EACH such relative (1) full name, (2) present address, (3) civil status, (4) Department or Agency by which employed, and (5) kind of appointment.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY, U.S.A. OR ANY COMMUNIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE A. If you are claiming preference as a PEACETIME VETERAN who has been awarded a campaign badge or service ribbon, or as a DISABLED VETERAN, or as the WIFE OF A DISABLED VETERAN, or as the WIDOW OF A WAR OR CAMPAIGN VETERAN, attach Veteran Preference Claim, CSC Form 14, together with proof, special thereon. B. If you are a WAR-TIME VETERAN, not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if approved, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.		
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	29. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR? (B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION? (C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES? (D) DATE OF ENTRY ON SERVICE: _____ DATE OF SEPARATION OR SEPARATIONS: _____ BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.): _____ SERIAL NO. (if none, give grade or rating at time of separation): _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF A "SECESSION" MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE USE OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEVERAL STATES, OR THE FORM OR GOVERNMENT OF THE UNITED STATES BY UNION WITH SEVERAL STATES?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON? (B) ARE YOU A DISABLED VETERAN? If so, and you have not listed your disability in answer to item 33, explain in item 39 below. (C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED? (D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED DISABILITY WHICH QUALIFIES HIM FOR CIVIL SERVICE PREFERENCE?		
30. IF YOUR ANSWER TO QUESTION 29, 28, OR 29 ABOVE IS "YES," STATE IN ITEM 39 THE NAMES OF ALL SUCH ORGANIZATIONS, ASSOCIATIONS, MOVEMENTS, GROUPS, OR COMBINATIONS OF PERSONS AND DATES OF MEMBERSHIP. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	THIS SPACE FOR USE OF APPOINTING OFFICER ONLY The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on _____, 19____.		
31. HAVE YOU, SINCE YOUR BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR CONFINED IN COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR COMMITTED, TRIED, OR IMPRISONED OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)? If your answer is "Yes," list all such cases under item 39 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appropriate, your fingerprints will be taken.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Agency: _____ Title: _____		
32. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT, FROM UNSATISFACTORY SERVICE FROM ANY POSITION? If your answer is "Yes," give in item 39 the name and address of employer, date, and reason in each case.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	33. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
33. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? If your answer is "Yes," give dates of and reasons for such barment in item 39.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give complete details in item 39.		
34. DO YOU HAVE ANY PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY, WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	35. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
35. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	36. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
36. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	37. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
37. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	38. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
38. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	39. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
39. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	40. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
40. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	41. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
41. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	42. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
42. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	43. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
43. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	44. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
44. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	45. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
45. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	46. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
46. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	47. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
47. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	48. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
48. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	49. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
49. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	50. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
50. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	51. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
51. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	52. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
52. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	53. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
53. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	54. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
54. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	55. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
55. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	56. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
56. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	57. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
57. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	58. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
58. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	59. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
59. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	60. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
60. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	61. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
61. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	62. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
62. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	63. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
63. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	64. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
64. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	65. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
65. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	66. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
66. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	67. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
67. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	68. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
68. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	69. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
69. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
70. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	71. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
71. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	72. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
72. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	73. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
73. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	74. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
74. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	75. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
75. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	76. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
76. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	77. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
77. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	78. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
78. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	79. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
79. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	80. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
80. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	81. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
81. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	82. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
82. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	83. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
83. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	84. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
84. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	85. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
85. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	86. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
86. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	87. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
87. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	88. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
88. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	89. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
89. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	90. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
90. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	91. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
91. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	92. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
92. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	93. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
93. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	94. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
94. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	95. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
95. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	96. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
96. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	97. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
97. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	98. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
98. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	99. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		
99. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	100. SPECIAL FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)		

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly.

I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80).

SIGNATURE OF APPLICANT _____

(Sign your name in INK (once given, initial or initials, and surname). If female, prefix Miss or Mrs. and if married, give name as "Mrs. Mary L. Doe")

FORM DSP-14 9-26-51 <div style="text-align: center;"> DEPARTMENT OF STATE APPLICATION FOR FOREIGN SERVICE AND DEPARTMENTAL EMPLOYMENT <i>(Use with Standard Form 57)</i> </div> <p style="font-size: small;">If more space is required, use additional sheets of paper. Write on each sheet your name, address and date of birth. Identify each item, and attach to this application.</p>		BUDG. NO. 47-2071.3 APPROX. L. EXPIRES August 31, 1956 <div style="border: 1px solid black; padding: 2px;"> 1. a. NAME (Print) James Arthur MOEL </div> <div style="border: 1px solid black; padding: 2px;"> b. ADDRESS 511, Alban Towers, 3700 Mass. Ave., Washington, D.C. </div>	
2. USE OF APPLICATION - Check one box below to indicate whether you wish this application to be considered for Foreign Service employment only, or for both Foreign Service and Departmental employment. Completion of this form is not required for Department employment only. Standard Form 57 must be filled out in any case. <input checked="" type="checkbox"/> FOREIGN SERVICE ONLY <input type="checkbox"/> FOREIGN SERVICE AND DEPARTMENTAL			
3. PERMANENT ADDRESS (Place from which you will expect transportation of self and household effects, if any, if appointed to the Foreign Service) <div style="text-align: center;">San Diego, California</div>			
4. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? IF A NATURALIZED CITIZEN, GIVE PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. (Section 11 on Form 57). <div style="text-align: center;">Not applicable</div>			
5. a. ARE YOU NOW INVOLVED IN ANY LITIGATION OR SEPARATION AGREEMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO b. DO YOU KNOW OF ANY PROSPECTIVE LITIGATION IN WHICH YOU MAY BE INVOLVED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Give details, if answer is yes to a. or b.)			
6. WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT FOR OVERSEAS EMPLOYMENT? (Exclusive of allowances) \$ _____ PER YEAR			
7. WHAT RESTRICTIONS ARE THERE, IF ANY, ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD? <div style="text-align: center;">None</div>			
8. a. FULL NAME OF SPOUSE (If wife, give maiden name) Lillian Bobbett MOEL		b. DATE OF BIRTH January 12, 1911	
		c. PLACE OF BIRTH (City, State or Province, and Country) Colorado Springs, Colo.	
9. c. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? <div style="text-align: center;">not applicable</div>		d. IF NATURALIZED, GIVE PLACE, DATE, AND NO. OF NATURALIZATION CERTIFICATE. <div style="text-align: center;">not applicable</div>	
9. NAMES OF DEPENDENTS		RELATIONSHIP	
9. DATE OF BIRTH		WILL RESIDE WITH YOU OVERSEAS YES NO	
Lillian Bobbett Moel		wife	
James A. Moel, Jr.		son	
Richard A. Moel		son	
Jan. 12, 1911		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Nov. 3, 1948		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
April 30, 1951		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
10. a. FATHER'S NAME Alfred E. MOEL		b. PRESENT ADDRESS 1714 Dale St, San Diego, Calif.	
10. c. PLACE OF BIRTH Plainfield, N.J.			
11. a. MOTHER'S NAME (Maiden) Ethel Louise LEACOCK		b. PRESENT ADDRESS deceased	
11. c. PLACE OF BIRTH New York City, N.Y.			
12. IF PARENTS BORN OUTSIDE THE UNITED STATES, DID THEY EVER OBTAIN UNITED STATES CITIZENSHIP? (Check below) FATHER <input type="checkbox"/> YES <input checked="" type="checkbox"/> N.A. <input type="checkbox"/> NO MOTHER <input type="checkbox"/> YES <input checked="" type="checkbox"/> N.A. <input type="checkbox"/> NO			
13. HAVE YOU EVER APPLIED FOR A POSITION WITH THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION WITH THE DEPARTMENT OF STATE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If "Yes" give date, nature of position applied for, and kind of examination taken, if any. I was employed in the Foreign Service of the State Department from January 26, 1931 to December 1951.			

NAME		RELATIONSHIP	ADDRESS	
None				

15. FOREIGN LANGUAGES (Specify item 19 on Form 57)
Indicate and estimate the extent of your competence, i.e., Excellent, Good, Fair

A. LANGUAGE	B. READ	C. WRITE	D. SPEAK	E. UNDERSTAND
Spanish	Excellent	Good	Good	Excellent

16. LIST PRESENT OR FORMER FOREIGN CONNECTIONS:

A. BUSINESS **U.S. Foreign Service from Jan. 26, 1931 to Dec. 1951.**
 B. EMPLOYMENT
 C. MILITARY

17. DATES AND PLACES OF RESIDENCE FOR LAST 10 YEARS

DATES	STREET AND NUMBER	CITY	STATE OR COUNTRY
1941-1944	Ave. del Bosque 369	Guadalajara	Mexico
1944-1946	Various	Bilbao, Madrid, Barcelona	Spain
1947-1949	1° Calle y 2° Avenida	Guatemala City	Guatemala
1949-1951	Ave. Aguirre 52	San Isidro (Buenos Aires)	Argentina
1951 (Dec)			California

18. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBTS INCURRED? ☒ YES ☐ NO
 IF "NO," STATE INFORMATION REQUESTED BELOW:

NAMES OF CREDITORS	AMOUNTS DUE	DATES ON WHICH OBLIGATIONS WERE CONTRACTED
None		

19. HAVE YOU EVER BEEN MEDICALLY DISCHARGED FROM THE ARMED SERVICE? ☐ YES ☒ NO
 IF "YES," GIVE DETAILS IN ITEM 39 OF FORM 57.

20. PRESENT MILITARY STATUS

A. ARE YOU REGISTERED WITH A SELECTIVE SERVICE BOARD? ☐ YES ☒ NO IF "YES," STATE BELOW THE NUMBER AND ADDRESS OF THE BOARD, AND YOUR CLASSIFICATION:

B. DO YOU HAVE A SELECTIVE RESERVE STATUS? ☐ YES ☒ NO IF "YES," STATE BELOW, THE BRANCH OF SERVICE, YOUR SERIAL NUMBER, YOUR ORGANIZATION UNIT AND HEADQUARTERS.

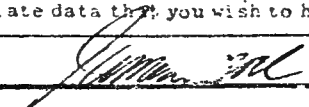
21. LIST OTHER NAMES, IF ANY, BY WHICH YOU HAVE BEEN KNOWN INCLUDING MARRIED NAMES, IF MARRIED MORE THAN ONCE, GIVING DATE DURING WHICH NAMES WERE USED. DO NOT DUPLICATE INFORMATION SUPPLIED IN ITEM 16 ON FORM 57.

None

22. HAVE YOU EVER BEEN UNDER THE CIVIL SERVICE RETIREMENT SYSTEM? ☐ YES ☒ NO
Subject to C.S. Retirement Act

23. SOCIAL SECURITY NUMBER, IF ANY:

24. If you believe the information you have supplied on this application does not fully show your qualifications for Foreign Service Employment, state in Item 39 of Form 57 or on a separate sheet, any additional appropriate data that you wish to have considered.

DATE March 10, 1952	SIGNATURE 
-------------------------------	---

SECRET

SECURITY INFORMATION

4 June 1952

MEMORANDUM FOR: Chief, Liaison Control, OSO

SUBJECT : James A. NOEL

2. This Division has now been informed that the medical staff of CIA will not approve an overseas assignment for Mr. Noel until 1 August 1952. At that time Mr. NOEL will undergo another physical examination and if results are satisfactory he will be certified as fit for overseas duty.

3. In order to avoid cancellation of Mr. NOEL's appointment, it is requested that the Department of State be asked not to call Mr. NOEL to enter on duty until advised by OSO that he is certified for overseas duty and ready to proceed to his Caracas assignment, subject to State's concurrence. It is anticipated that this will occur about 1 August 1952, or shortly thereafter.

J. C. King
for J. C. King
Chief, Western Hemisphere

State Dept informed 10 June 52 by WHH

SECRET

Central Intelligence Agency
2430 E Street, N. W.
Washington, D. C.

Date 14 August 1953

Gentlemen:

1. In accordance with the policy of this agency, it is understood and agreed by me that I shall be required to serve a minimum term of two years from the date of my arrival at my overseas post of duty, unless terminated by the Government for its convenience. If the assignment is terminated at my request in less than twenty-four months, the following shall prevail:

(a) If I resign in less than twelve months from the date of my arrival at my overseas post of duty, I shall reimburse CIA for all travel expenses involved in the transportation of myself, my immediate family, household goods, and personal effects and automobile to the foreign station, and pay all such expenses for return to the United States.

(b) If I resign between the twelfth and twenty-fourth month from the date of my arrival at my overseas post of duty, I shall pay all expenses for the travel and transportation of myself, my immediate family, household goods, and personal effects and automobile to the United States.

2. Part (a) above shall not apply to employees who have served in a operational position with CIA or who have served an overseas tour of duty with CIA, and in such case part (b) only shall apply, amended to read: "If I desire to terminate or return to the United States prior to the expiration of twenty-four months from the date of my arrival at my overseas post of duty, I shall reimburse CIA for the travel and transportation of myself, my immediate family, household goods, and personal effects to the United States".

[Signature]

Witness:

APPLICATION FOR FEDERAL EMPLOYMENT

Form suggested
Budget Bureau No. 50-2046

INSTRUCTIONS—Answer every question below fully and completely. Type or print in INK. If you are applying for a position in the Civil Service examination, send the examination announcement carefully with this application. Mail this application to the office named in the advertisement. Be sure to fill in the same office any other forms required by the advertisement. Notify the office with which you file this application of any change in your address.

1. Name of examination, or kind of position applied for
Chief of Station

2. General subject (if mentioned in examination announcement)

3. Place of employment applied for
Barcelona, Spain

4. (First name) (Last name) (Maiden, if any) (Last)
James Arthur NOEL

5. Street and number or R. D. number

City or post office (including postal zone), and State

6. Legal or voting residence (State) 7. Office phone No. Home phone
California

8. Place of birth (city and State; if born outside U. S., name city and country)
New York, New York

9. Date of birth (month, day, year) 10. Age last birthday 11. ☒ Male ☐ Female
March 19, 1913 35

12. ☒ Married ☐ Single 13. Height without shoes: **6** feet **0** inches **185** pounds

14. Have you ever been employed by the Federal Government? ☒ Yes ☐ No
If now employed by the Federal Government, give present grade and date of last change in grade.
CAF-12, July 1, 1945.

DO NOT WRITE IN THIS BLOCK
The Use of Civil Service Commission

<input type="checkbox"/> Approved	<input type="checkbox"/> Material	<input type="checkbox"/> Entered register
<input type="checkbox"/> Disapproved	<input type="checkbox"/> Submitted	<input type="checkbox"/> Returned
App. Review		Approved
OPTION	GRADE	EARNED RATING
		DIFFERENCE
		AUGM. RATING
		<input type="checkbox"/> 5 points (less)
		<input type="checkbox"/> 10 points
		<input type="checkbox"/> Wife, or Widow
		<input type="checkbox"/> Dead
		<input type="checkbox"/> Being investigated
INITIALS AND DATE		

Indicate "Yes" or "No" answer by placing X in proper column

	YES	NO
18. (a) Would you accept short-term appointment, if offered:		
1 to 3 months?		<input checked="" type="checkbox"/>
3 to 6 months?		<input checked="" type="checkbox"/>
6 to 12 months?		<input checked="" type="checkbox"/>
(b) Would you accept appointment, if offered—		
in Washington, D. C.?	<input checked="" type="checkbox"/>	
anywhere in the United States?	<input checked="" type="checkbox"/>	
outside the United States?	<input checked="" type="checkbox"/>	
19. (c) If you will accept appointment in certain locations ONLY, give acceptable locations		
(d) What is the lowest minimum salary you will accept? \$5,905.20 per year.		
You will not be considered for positions paying less.		
(e) If you are willing to travel, specify: <input type="checkbox"/> Occasionally <input checked="" type="checkbox"/> Frequently <input type="checkbox"/> Constantly		

16. EXPERIENCE—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing authority to determine your qualifications for the position for which you are applying. In this space provided below describe EVERY position you have held. Use a separate block for EACH position. You may also include any pertinent religious, civic, academic or professional activity which you have participated in, showing the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, accounting for all parts of your employment. Explain clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in question 17 (Military Experience).

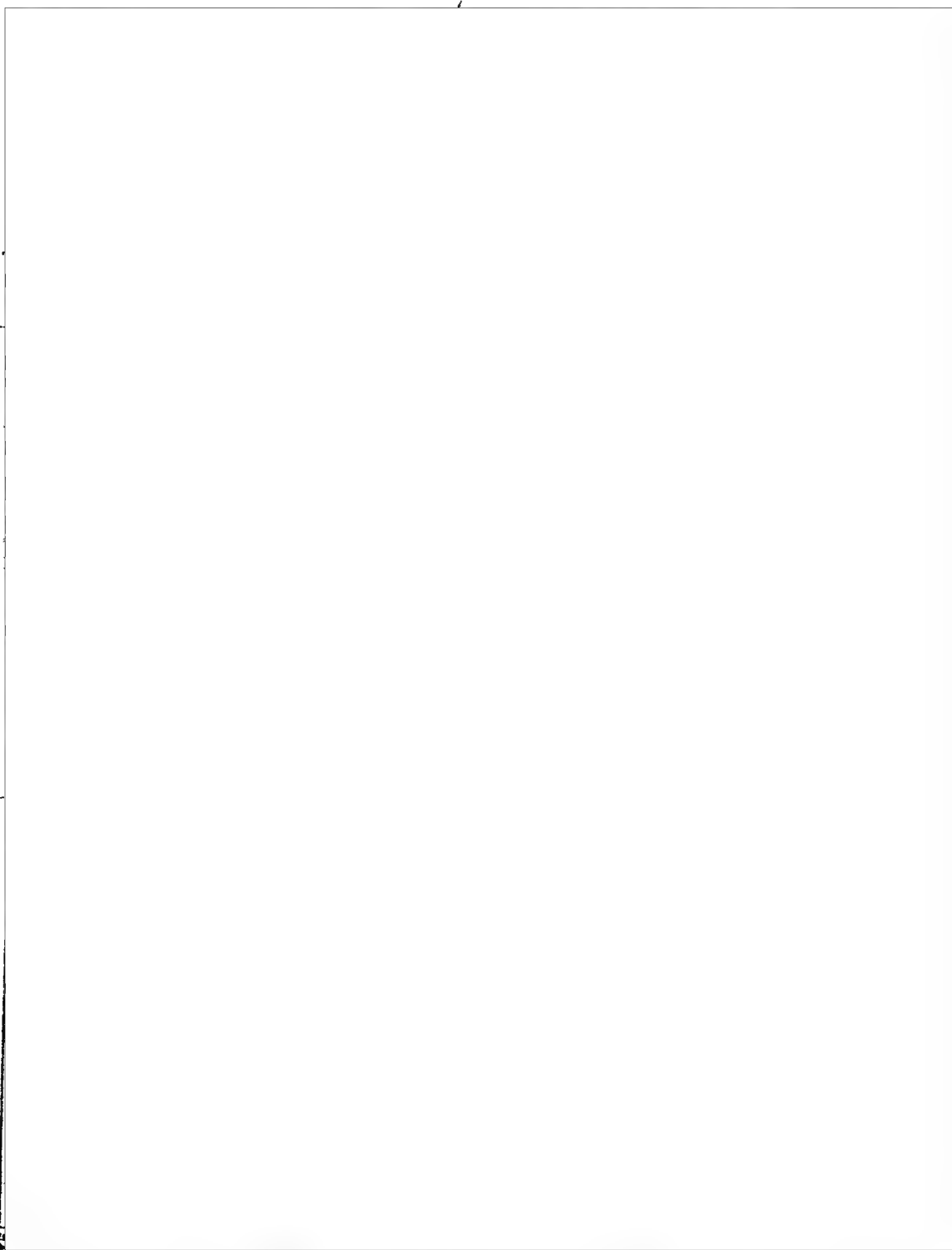
17. If you were ever employed in any position under a name different from that shown in item 4 of this application, give under "Description of your work" for each position, the name used.

18. If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

PRESENT POSITION	
Date of employment (Month, year) From August, 1944	To present time
Place of employment (city and State): Barcelona, Spain	
Name and address of employer (firm, organization, or person): SSU, FBI	
Kind of business or organization (e.g., wholesale store, insurance company, etc.): SSU, FBI	
Number and kind of employees supervised by you: 2 clerical; 12 outside agents	
Name and title of immediate supervisor: Acting Chief of	
Reason for changing employment: liquidation of SSU	
Salary or earnings, With or Without Overtime: Starting \$4,680 per year Present \$5,905 per year	
Description of your work: Chief of Station at Barcelona. Direction of intelligence chains, evaluation of material and preparation of intelligence reports. Preparation of political reports on behalf of Consulate General, Barcelona, and military reports on behalf of Military Attache,	

(CONTINUED ON NEXT PAGE)

16-47505-3



17. MILITARY EXPERIENCE-In order to best determine the relative importance of military experience, the following information should be obtained from each service school and indicated in item (c) all important changes in duty assignment, showing dates:

(a) First Special Service School attended:

Location:

Dates attended (month, year):

From: To:

Rating received at end of this training:

(c) Duty assignment or rating after this training (give all subsequent changes in duty assignment whether or not you attended a Service School):

Dates of duty assignment (month, year):

From: To:

(d) Second Special Service School attended:

Location:

Dates attended (month, year):

From: To:

Rating received at end of this training:

(e) Duty assignment after this training:

Dates of duty assignment (month, year):

From: To:

List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.

18. EDUCATION - Circle highest grade completed

1 2 3 4 5 6 7 8 9 10 11 12

Mark (X) the appropriate line to denote satisfactory completion of:

☐ Elementary School ☐ Junior High School ☒ Senior High School

(a) Name and Location of College or University

Name:

Dates Attended

From: To:

Years Completed

Day Night

Degree Conferred

Title Date

Semester Hours Credit

(b) List Your Chief Undergraduate College Subjects

Subject Hours

List Your Chief Graduate College Subjects

Subject Hours

(c) Other training such as noncommissioned, technical, duty service, etc. through the Armed Forces Institute (name course and location of school, or "in service training" in a Federal Agency):

Special training in intelligence work at OSS. Sixteen years of government foreign service.

19. Indicate your knowledge of foreign languages:

Spanish

READING SPEAKING UNDERSTANDING

Can Read Fair Can Read Fair Can Read Fair

X X X

(d) How was your knowledge of Spanish language acquired?

Sixteen years of residence in Spanish speaking countries.

(e) List countries or nations in any foreign countries indicate number of countries (2) name and length of time spent there and (3) degree of proficiency in language (proficiency, restricted)

Mexico, 1931-44; Spain 1944-46; Gov't

(f) List technical skills, trades and machines and equipment that you are such as operation of motor car, radio, or other equipment, key punch, turret table, scientific or professional devices.

(g) Are you now or have you ever been a licensed or certified member of any trade or profession (such as pilot, electrician, radio operator, teacher, lawyer, C.A., etc.)

☐ Yes ☒ No Give kind of license and State:

List license or certificate (year):

(h) Give any special qualifications or unusual experience in your education such as:

(1) four more important qualifications (do NOT include degree unless required)

(2) four patents or inventions

(3) public speaking and public relations experience

(4) membership in professional or scientific societies, etc.

23. REFERENCES - List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16. LIST NAME

FULL NAME BUSINESS OR HOME ADDRESS (Give complete address including street and number) BUSINESS OR OCCUPATION

24. May inquiry be made of your present employer regarding your character, qualifications, etc? ☒ Yes ☐ No

Indicate "Yes" or "No" answer by placing X in proper column

Indicate "Yes" or "No" answer by placing X in proper column

25. Are you a citizen of the United States? ☒ YES ☐ NO

26. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? ☒ YES ☐ NO

If your answer is "Yes," give complete details in Item 28.

27. Within the past 12 months, have you habitually used intoxicating beverages to excess? ☒ YES ☐ NO

28. Since your 16th birthday, have you ever been arrested, or fined, or imprisoned, or placed on probation, or have you ever been ordered to deposit bail, for the violation of any law, police regulation or ordinance (including minor traffic violations for which a fine of \$25 or less was imposed)? ☒ YES ☐ NO

If your answer is "Yes," list all such cases under Item 29 below. Give in each case: (1) the date, (2) the nature of the offense or violation, (3) the name and position of the court, (4) the penalty imposed, if any, or other disposition of the case. If arrested, your fingerprints will be taken.

29. Have you ever been discharged or forced to resign by misconduct or unsatisfactory service from any position? ☒ YES ☐ NO

If your answer is "Yes," give in Item 30 the nature and address of employer, date, and reason in each case.

30. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other compensation for military or naval service? ☒ YES ☐ NO

If your answer is "Yes," give in Item 31 the reason for retirement, that is, age, optional disability or by reason of voluntary or involuntary retirement after 3 years' service; amount of retirement pay, and under what retirement act, and stating if retired from military or naval service.

31. Are you an official or employee of any State, Territory, county, or municipality? ☒ YES ☐ NO

If your answer is "Yes," give details in Item 32.

32. Does the U. S. Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 3 months? ☒ YES ☐ NO

If your answer is "Yes," show in Item 33 for EACH such relative: (1) full name, (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment.

33. Have you ever had a nervous breakdown? ☒ YES ☐ NO

If your answer is "Yes," give complete details in Item 34.

34. Have you ever had tuberculosis? ☒ YES ☐ NO

If your answer is "Yes," give complete details in Item 35.

35. Space for detailed answers to other questions (Indicate item numbers to which answers apply).

36. I do not know if service with OSS in a civilian capacity abroad is considered "military service." However, since an "honorably served" certificate was issued to me, and since the org. was under the Joint Chiefs of Staff, reference to the service is being included for whatever it may be worth.

37. (a) If you served in the U. S. Military or Naval Service during peacetime ONLY, did you participate in a campaign or expedition and receive a campaign badge or service ribbon? ☒ YES ☐ NO

(b) Are you a disabled veteran? ☒ YES ☐ NO

(c) Are you the unmarried widow of a veteran? ☒ YES ☐ NO

(d) Are you the wife of a veteran who has service-connected disability? ☒ YES ☐ NO

IF YOUR ANSWER TO QUESTION 37 (a), (b), (c), OR (d) IS "YES," AND YOU WISH TO CLAIM VETERAN PREFERENCE ATTACH TO THIS APPLICATION VETERAN PREFERENCE CLAIM, CIVIL SERVICE COMMISSION FORM 141, TOGETHER WITH THE NECESSARY PROOF SPECIFIED THEREIN.

THIS SPACE FOR USE OF APPOINTING OFFICE ONLY

The information contained in the answers to Question 36 above has been verified by comparison with the discharge certificate on _____, 19____.

Agency: _____ Title: _____

38. Space for detailed answers to other questions (Indicate item numbers to which answers apply).

39. I have given to you the paper the name of this page. Write on each sheet your name, address, date of birth, and occupation title. Attach to inside of this application.

FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE TITLE 18, SECTION 1001).

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Date: 3 Oct. 1946

Signature of applicant: _____

(Sign your name in INK (use blue ink, indelible ink, or blue and black ink). If female print Miss or Mrs. and if married use your own given name (e.g., Mrs. Mary L. Doe).)

40. 16-7200-2

PERSONAL HISTORY STATEMENT

INSTRUCTIONS: ANSWER ALL QUESTIONS COMPLETELY. IF QUESTION DOES NOT APPLY WRITE "NOT APPLICABLE". WRITE "UNKNOWN" ONLY IF YOU DO NOT KNOW THE ANSWER AND CANNOT OBTAIN THE ANSWER FROM PERSONAL RECORDS. USE A SEPARATE SHEET OF PAPER FOR EXTRA DETAILS ON ANY QUESTION OR QUESTIONS FOR WHICH YOU DO NOT HAVE SUFFICIENT ROOM. ATTACH TWO RECENT PASSPORT SIZE PICTURES TO THIS FORM. DATE TAKEN WRITTEN ON THE BACK OF EACH. TYPE, PRINT OR WRITE CAREFULLY; ILLEGIBLE OR INCOMPLETE FORMS WILL NOT RECEIVE CONSIDERATION.

HAVE YOU READ AND UNDERSTOOD THE ABOVE INSTRUCTIONS?

YES ☒

NO ☐

SECTION 1. PERSONAL BACKGROUND

NAME: FIRST James MIDDLE Arthur LAST NOEL TELEPHONE 95-37
 MR. ☒ MISS ☐ MRS. ☐
 PRESENT ADDRESS: STREET AND NUMBER Chalet Sylvia, 2a Av. y 1a. Calle de Santa Clara, Guatemala City, Guate. CITY Guatemala City STATE Guatemala COUNTRY Guatemala
 LEGAL RESIDENCE: STREET AND NUMBER 4389 McClintock Street, CITY San Diego STATE California COUNTRY U.S.A.

NICKNAMES Jim, Jaime OTHER NAMES THAT YOU HAVE USED none

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES?

HOW LONG?

IF LEGAL CHANGE, GIVE PARTICULARS (WHERE, WHEN AND BY WHAT AUTHORITY)

DATE OF BIRTH Mar. 19, 1911 PLACE OF BIRTH New York City, CITY New York, STATE U.S.A. COUNTRY U.S.A.

PRESENT CITIZENSHIP

US

ACQUIRED BY:

BIRTH ☒

MARRIAGE ☐

NATURALIZATION ☐

NATURALIZATION CERTIFICATE

NUMBER ---

DATE ISSUED ---

NAME OF COURT ---

LOCATION OF COURT

CITY ---

STATE ---

PREVIOUS CITIZENSHIP

none

DATE HELD

FROM: ---

TO: ---

OTHER CITIZENSHIPS (GIVE PARTICULARS)

none

STEPS TAKEN TO CHANGE PRESENT NATIONALITY (GIVE PARTICULARS)

none

LAST U.S. PASSPORT: NUMBER Diplomatic 261 DATE 25-Mar. 1947 PLACE OF ISSUE Washington, D.C.

ALL OTHER U.S. PASSPORTS YOU HAVE HAD (GIVE APPROXIMATE DATES)

Spec. Pass. 32694, 4/10/43, Wash; plus 4 other Spec. Passports issued (between Jan. 1931 and October 1943).

PASSPORTS OF OTHER NATIONS

none

IF BORN OUTSIDE U.S.

DATE OF ARRIVAL IN THIS COUNTRY ---

PORT OF ENTRY ---

PASSPORT OF COUNTRY ---

LAST U.S. VISA

NUMBER ---

TYPE ---

DATE ---

PLACE OF ISSUE ---

SECTION 2. PHYSICAL DESCRIPTION

AGE 36 SEX Male HEIGHT 6' 0" WEIGHT 185 Lbs. EYES Ek. Brown HAIR Dk. Brown

COMPLEXION

Ruddy

SCARS

Two scars on neck

BUILD

heavy

OTHER DISTINGUISHING FEATURES

none



SECTION 3. MARITAL STATUS									
MARRIED <input checked="" type="checkbox"/>	WIDOWED <input type="checkbox"/>	SEPARATED <input type="checkbox"/>	DATE OF SEPARATION OR DIVORCE		PLACE				
SINGLE <input type="checkbox"/>	DIVORCED <input type="checkbox"/>								
REASON FOR SEPARATION OR DIVORCE									
NOTE: IF YOU HAVE BEEN MARRIED MORE THAN ONCE USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND AND GIVE DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.									
NAME OF WIFE OR HUSBAND	FIRST	MIDDLE (FOR WIFE, MAIDEN)	LAST		DATE OF MARRIAGE				
	Lillian	Bobbett	Noel		29 September 1934				
PLACE OF MARRIAGE	(HIS OR HER ADDRESS BEFORE MARRIAGE)		STREET AND NUMBER		CITY	STATE	COUNTRY		
San Diego, California			3614 Fairmount Ave.,		San Diego,	Calif.			
LIVING <input checked="" type="checkbox"/>	DATE OF DECEASE		CAUSE						
DECEASED <input type="checkbox"/>									
PRESENT OR LAST ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY				
	Chalet Sylvia, 2a. Av. y la. Calle de Sta. Clara,		Guatemala City		U.S.A.				
DATE OF BIRTH	PLACE OF BIRTH		CITY	STATE	COUNTRY				
12 January 1911	Colorado Springs,		Colorado,		U.S.A.				
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY				
U.S.	birth								
OCCUPATION	LAST EMPLOYER								
housewife	San Diego Board of Education								
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY				
	Board of Education,		San Diego,	California,	U.S.A.				
DATE OF MILITARY SERVICE	FROM	TO	BRANCH OF SERVICE		COUNTRY				
	none								
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)									
U.S. Consulate, Ensenada, Baja California, Mexico, from 1934 to 1937.									
SECTION 4. CHILDREN OR DEPENDENTS (INCLUDE PARTIAL DEPENDENTS)									
NAME	RELATIONSHIP		AGE						
none									
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY				
NAME	RELATIONSHIP		AGE						
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY				
NAME	RELATIONSHIP		AGE						
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY				
SECTION 5. PARENTS									
NOTE: FOR STEPFATHER, STEPMOTHER AND/OR GUARDIAN, GIVE THE SAME INFORMATION AS REQUIRED BELOW ON SEPARATE SHEET									
NAME OF FATHER	FIRST	MIDDLE	LAST		LIVING <input checked="" type="checkbox"/>		DECEASED <input type="checkbox"/>		
	Alfred	Edwin	Noel						
DATE OF DECEASE	CAUSE								
PRESENT OR LAST ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY				
	1714 Dale Street		San Diego, 5,	California,	U.S.A.				
DATE OF BIRTH	PLACE OF BIRTH		CITY	STATE	COUNTRY				
2 May 1886	Plainfield,		New Jersey,		U.S.A.				
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY				
U.S.	birth								
OCCUPATION	LAST EMPLOYER								
Supervisor	Curtis Publishing Company								
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY				
			San Diego, 5,	California,	U.S.A.				
SECTION 5. PARENTS (CONTINUED) I understand my father is, or is about to be, re-married, but I have no information concerning his prospective stepmother.									

SECTION 5. PARENTS (CONTINUED. PAGE 2)									
DATE OF MILITARY SERVICE		FROM: none		TO: ---		BRANCH OR SERVICE		COUNTRY	
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)									
none									
NAME OF MOTHER		FIRST		MAIDEN		LAST		LIVING <input type="checkbox"/> DECEASED <input checked="" type="checkbox"/>	
		Ethel		Leacock		Noel			
DATE OF DECEASE		CAUSE							
21 Feb. 1943		Bright's disease							
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		1714 Dale Street,		San Diego, 5,		California,		U.S.A.	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE		COUNTRY	
10 March 1888		New York City,		New York,		U.S.A.			
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE COUNTRY	
U.S.		birth				---			
OCCUPATION		LAST EMPLOYER							
housewife		-----							
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	

GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)									
none									
SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-STEP- AND ADOPTED BROTHERS AND SISTERS)									
NAME		FIRST		MIDDLE		LAST			
		Edward		Charles		Noel			
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		815 South Lake St.,		Los Angeles, 5,		California,			
NAME		FIRST		MIDDLE		LAST			
		George		Thomas		Noel			
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
				Laguna Beach,		California,		U.S.A.	
NAME		FIRST		MIDDLE		LAST			
		William		Alfred		Noel			
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		1714 Dale Street,		San Diego, 5,		California,		U.S.A.	
SECTION 7. PARENTS-IN-LAW									
NAME OF FATHER-IN-LAW		FIRST		MIDDLE		LAST		LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>	
		Albert		none		Bobbett			
DATE OF DECEASE		CAUSE							
-----		-----							
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		4389 McClintock Street,		San Diego,		California,		U.S.A.	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE		COUNTRY	
Feb. 2, 1886				Wells,		Somerset		England	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE COUNTRY	
U.S.		13/1/23 naturalization						Colorado Springs, Colorado	
OCCUPATION		LAST EMPLOYER							
retired merchant		self							
NAME OF MOTHER-IN-LAW		FIRST		MAIDEN		LAST		LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>	
		Thala		Clausen		Bobbett			
DATE OF DECEASE		CAUSE							
----		-----							
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		4389 McClintock Street,		San Diego, 5,		California,		U.S.A.	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE		COUNTRY	
July 10, 1881				Neksø		Bornholm		Denmark	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE COUNTRY	
U.S.		22 June 1928				San Diego,		California	
OCCUPATION		LAST EMPLOYER							
housewife		-----							

SECTION 5. PARENTS (CONTINUED PAGE 2)							
DATE OF MILITARY SERVICE		FROM: none		TO: ---		BRANCH OR SERVICE	
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none							
NAME OF MOTHER		FIRST Ethel		MAIDEN Leacock		LAST Noel	
DATE OF DECEASE		21 Feb, 1943		CAUSE Bright's disease		LIVING <input type="checkbox"/> DECEASED <input checked="" type="checkbox"/>	
PRESENT OR LAST ADDRESS		STREET AND NUMBER 1714 Dale Street,		CITY San Diego, 5,		STATE California, U.S.A.	
DATE OF BIRTH		10 March 1888		PLACE OF BIRTH New York City,		CITY New York, U.S.A.	
CITIZENSHIP		U.S.		DATE ACQUIRED		WHERE ACQUIRED	
OCCUPATION		housewife		LAST EMPLOYER		-----	
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER		CITY		STATE	
GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none							
SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-STEP- AND ADOPTED BROTHERS AND SISTERS)							
NAME		FIRST Edward		MIDDLE Charles		LAST Noel	
PRESENT ADDRESS		STREET AND NUMBER 815 South Lake St.,		CITY Los Angeles, 5,		STATE California, U.S.A.	
NAME		FIRST Louise		MIDDLE Rhoda		LAST Noel	

ADD - Section 6. (Brothers and Sisters)

<u>Name</u>	<u>First</u>	<u>Middle</u>	<u>Last</u>
	Robert	Joseph	Noel
<u>Present Address</u>	<u>Street</u>	<u>City</u>	<u>State</u>
	1942 4th Street,	Seattle, 99,	Washington.

<u>Name</u>	<u>First</u>	<u>Middle</u>	<u>Last</u>
	Louise	Rhoda	Noel
<u>Present Address</u>	<u>Street</u>	<u>City</u>	<u>State</u>
	1714 Dale Street,	San Diego, 2,	California.

DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE		COUNTRY	
July 10, 1881		Neksø		Bornholm		Denmark			
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE	
U.S.		22 June 1923		San Diego,		California			
OCCUPATION		LAST EMPLOYER							
housewife									

SECTION 8. RELATIVES

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO LIVE ABROAD, ARE UNDER THE INFLUENCE OF A FOREIGN POWER, ARE NOT CITIZENS OF THE UNITED STATES, OR ARE MARRIED TO NON-CITIZENS.

NAME: I have no relatives who are not citizens of the United States or who are married to non-citizens. RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD OR MARRIAGE, IN MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE (UNITED STATES OR FOREIGN)

NAME: George Thomas Noel RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

Civil employee of U.S. Navy Department at El Toro Field, Santa Ana, Calif

NAME RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

NAME RELATIONSHIP AGE

CITIZENSHIP ADDRESS STREET AND NUMBER CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

SECTION 9. EDUCATION

SCHOOL ADDRESS CITY STATE COUNTRY

S.D. Sr. High School San Diego, California, U.S.A.

DATES ATTENDED FROM 1926 TO Feb. 1929 DEGREE Diploma

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SCHOOL ADDRESS CITY STATE COUNTRY

DATES ATTENDED FROM TO DEGREE

SECTION 10. SELECTIVE SERVICE STATEMENTS (CONTINUED TO PAGE 5)

SECTION 10. SELECTIVE SERVICE - US				
CLASSIFICATION II-A	ORDER NUMBER 2856-B	APPROXIMATE INDUCTION DATE ---	BOARD NUMBER 156	
ADDRESS OF BOARD 2356 30th Street,		CITY San Diego, 2,	STATE California	
IF DEFERRED, STATE REASON ---				
SECTION 11. MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE - UNITED STATES OR FOREIGN				
COUNTRY U.S.A.	SERVICE Foreign Service	SERVICE DATES 26 January 1931	TO: date	
GRADE Attaché	SERIAL NUMBER ---	TYPE OF DISCHARGE ----		
LAST STATION American Embassy, Guatemala City		COMMANDING OFFICER Ambassador Edwin J. Kyle		
REMARKS:				
SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (USE ADDITIONAL SHEET IF NECESSARY).				
NOTE: INCLUDE BELOW PERIODS OF UNEMPLOYMENT AND CASUAL EMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. INCLUDE LAST 5 POSITIONS AND COVER AT LEAST 15 YEARS.				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS American Consulate, Ensenada, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY Gen. consular, including immigration, passports		NAME OF SUPERVISOR Consul Wm. A. Smaile		
DATES COVERED	FROM: 26 January 1931	TO: 6 October 1938	SALARY \$1,800.00	PER annua
REASONS FOR LEAVING transferred to American Consulate at Mazatlán, Mexico.				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS American Consulate, Mazatlán, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY shipping, invoice, immigration, political rep.		NAME OF SUPERVISOR Consul Rufus H. Lane, Jr.		
DATES COVERED	FROM: November 1938	TO: August 1941	SALARY \$2,250.00	PER annua
REASONS FOR LEAVING transferred to American Consulate, Guadalajara, Mexico				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS American Consulate, Guadalajara, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY passport, visa, political & economic reporting		NAME OF SUPERVISOR Consul Maurice L. Stafford		
DATES COVERED	FROM: August 1941	TO: August 1944	SALARY \$3,160.	PER annua
REASONS FOR LEAVING to accept employment with Office of Strategic Services				
EMPLOYER Office of Strategic Services		JOB TITLE Station Chief		
ADDRESS American Consulate, Bilbao, Spain		KIND OF BUSINESS government		

(CONTINUED TO PAGE 6)

PAGE 5

SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (CONTINUED FROM PAGE 5)					
YOUR DUTIES AND SPECIALTIES Special reporting			NAME OF SUPERVISOR Donn Paul Medalie		
DATE COVERED	FROM	TO	SALARY	PER	
	September 1944	December 1945	\$4,680.00	annum	
REASONS FOR LEAVING temporarily assigned to American Embassy, Madrid, Spain					
EMPLOYER Office of Strategic Services			JOB TITLE		
ADDRESS STREET AND NUMBER American Embassy, Madrid, Spain			CITY STATE Madrid, Spain		
YOUR DUTIES AND SPECIALTIES investigating and reporting			NAME OF SUPERVISOR Donn Paul Medalie		
DATE COVERED	FROM	TO	SALARY	PER	
	December 1945	May 30, 1946	\$5,190.00	annum	
REASONS FOR LEAVING transferred to Barcelona, Spain					
EMPLOYER Strategic Service Unit (War Department)			JOB TITLE Station Chief		
ADDRESS STREET AND NUMBER American Consulate General, Barcelona, Spain			CITY STATE Barcelona, Spain		
YOUR DUTIES AND SPECIALTIES specialized reporting			NAME OF SUPERVISOR Donn Paul Medalie		
DATE COVERED	FROM	TO	SALARY	PER	
	June 1, 1946	Mar. 1, 1947	\$5,905.00	annum	
REASONS FOR LEAVING					
NOTE: IN SPACE BELOW GIVE DETAILS CONCERNING ANY POSITION FROM WHICH YOU MAY HAVE BEEN DISCHARGED OR WHICH YOU MAY HAVE LEFT UNDER CIRCUMSTANCES WHICH WERE NOT ENTIRELY FAVORABLE.					
DETAILS:					

SECTION 13. CHARACTER REFERENCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)					
NAME	ADDRESS STREET AND NUMBER CITY STATE				
Mr. Frank Forward	Union Title Co., San Diego, California				
Mr. Gordon B. Dunlap	5602 Broadway, San Antonio, Texas				
Mr. Wayne L. Brown	1667 Pontiac Street, Denver, Colorado				
Col. Herbert King	731 Macon Street, Brooklyn, New York				
Mr. Wm. Blackstone	Riviera Lpts., 1000 2nd St., Coronado, Calif				
SECTION 14. SOCIAL ACQUAINTANCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)					
NAME	ADDRESS STREET AND NUMBER CITY STATE				
Mr. Paul W. Boltz	4451 Monroe, San Diego, California				
Mr. Art Jacobs	4441 42nd Street, San Diego, California				
Gen. Rufus H. Lane (Ret'd)	Falls Church, Virginia				
Mr. C. Wendelin	State Department, Washington, D.C.				
Jack L. Neal	State Department, Washington, D.C.				
SECTION 15. NEIGHBORS-THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)					

NAME		ADDRESS - STREET AND NUMBER	CITY	STATE
Mr. Harry S. Hawley		500-K-101, 4 State Department	Washington	
Mr. Don Morgan		4320 Glenwood Drive, RT. 4, box 104	Riverdale	Calif.
Mr. R. G. Laddy		Street Address Unknown	Washington	D.C.

SECTION 16. MISCELLANEOUS

DID YOU EVER HAVE OR DO YOU NOW HAVE MEMBERSHIP IN, OR SUPPORT ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES? YES ☐ NO ☒

IF ANSWER IS "YES" EXPLAIN BELOW:

DO YOU USE, OR HAVE YOU USED INTOXICANTS? Social drinking only.

HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE, AND DISPOSITION OF CASE.

No

HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? YES ☐ NO ☒

IF ANSWER IS "YES", GIVE DETAILS BELOW:

SECTION 17. FINANCIAL BACKGROUND

ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES ☒ NO ☐ IF ANSWER IS "NO", STATE SOURCES OF OTHER INCOME:

NAMES OF BANKS WITH WHICH YOU HAVE ACCOUNTS

First National Trust & Savings Bank, San Diego, California.

HAVE YOU EVER BEEN IN BANKRUPTCY? YES ☐ NO ☒ IF ANSWER IS "YES", GIVE PARTICULARS:

SECTION 18. CREDIT REFERENCES-THREE IN THE UNITED STATES

NAME	ADDRESS - STREET AND NUMBER	CITY	STATE
First National Bank	5th & Broadway	San Diego	California
Garston & Company	5th & "C"	San Diego	California
Union Oil Company		San Diego	California

SECTION 19. RESIDENCES FOR PAST 15 YEARS

FROM	TO	ADDRESS - STREET AND NUMBER	CITY	STATE	COUNTRY
Jan. 1931	Oct. 1938	American Consulate	Ensenada	B.C.	Mexico
Nov. 1938	Aug. 1941	American Consulate	Mazatlan	Sin.	Mexico
Aug. 1941	Aug. 1944	American Consulate	Guadalajara	Jal.	Mexico

(CONTINUED TO PAGE 8)

PAGE 7

SECTION 19. RESIDENCES FOR PAST 15 YEARS (CONTINUED FROM PAGE 5)				
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
Aug. 1944	Dec. 1945	American Consulate	Bilbao	Vizcaya, Spain
Dec. 1945	May, 1946	American Embassy	Madrid	Spain
June 1946	March 1947	American Consulate General	Barcelona	Spain
April 1947	date			
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
SECTION 20. RESIDENCES OR TRAVEL OUTSIDE THE UNITED STATES				
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
	see No. 19 above	identical with above		
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
SECTION 21. CLUBS, SOCIETIES AND OTHER ORGANIZATIONS				
NOTE: IN SPACE BELOW LIST NAMES AND ADDRESSES OF ALL DOMESTIC AND FOREIGN CLUBS, SOCIETIES AND ORGANIZATIONS OF ALL KINDS TO WHICH YOU HAVE BELONGED, OTHER THAN RELIGIOUS SOCIETIES, POLITICAL PARTIES AND LABOR UNIONS. INCLUDE ANY ORGANIZATION HAVING HEADQUARTERS OR A BRANCH IN A FOREIGN COUNTRY OF WHICH YOU HAVE BEEN A MEMBER OR TO WHICH YOU HAVE GIVEN SUPPORT.				
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
DeMolay Society		La Mesa	California	(1930)
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
Rotary Club		Ensenada	Mexico	(1936)
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
Rotary Club		Guadalajara	Mexico	(1941)
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
Joliet Tennis Club		Bilbao	Vizcaya	Spain
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
British-American Club		Barcelona	Spain	
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
Mayan Golf Club		Guatemala City	Guatemala	
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY
SECTION 22. LANGUAGES-FOREIGN (STATE DEGREE OF PROFICIENCY AS "SLIGHT", "FAIR" OR "FLUENT")				
LANGUAGE	SPEAK	READ	WRITE	
Spanish	fluent	fluent	fluent	
LANGUAGE	SPEAK	READ	WRITE	
French	--	slight	--	
LANGUAGE	SPEAK	READ	WRITE	
LANGUAGE	SPEAK	READ	WRITE	
LANGUAGE	SPEAK	READ	WRITE	
LANGUAGE	SPEAK	READ	WRITE	
LANGUAGE	SPEAK	READ	WRITE	

SECTION 23. SPECIAL QUALIFICATIONS

Indicate in this section the special qualifications, skills, and knowledge you possess as a result of training or experience which distinguish you for a particular position.

I have had seventeen years of continuous service entered with the United States government. I have had considerable experience in all phases of government foreign service work, including: political, economic and agricultural reporting; citizenship, passport, visas, shipping and protection work. For varying periods of time I have been in charge of the American Consulates at Ensenada, Mazatlan and Guadalajara, Mexico. My long experience in Latin countries has provided an insight into Latin character, temperament and psychology which cannot be acquired in any other way. Three years of my service abroad has been devoted exclusively to investigative work. I have had special training in photography and reporting.

SECTION 24. SPORTS AND HOBBIES

Golf, tennis, bridge and reading.

SECTION 25. EMERGENCY ADDRESSEE

NAME	Alfred E. Noel			RELATIONSHIP	father
ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY	TELEPHONE
	1714 Hale Street	San Diego	Calif.		Franklin 5582

SECTION 26. INFORMATION AND FINAL COMMENTS

NOTE: YOU ARE INFORMED THAT CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED, AND YOU ARE INVITED TO MAKE ANY CHANGES (OR ADDITIONS) IN YOUR STATEMENTS THAT YOU MAY THINK ADVISABLE.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION, IF SO, DESCRIBE, IF NOT, ANSWER, "NO".

No.

SECTION 27. CERTIFICATION

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY INTENTIONAL MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR MY IMMEDIATE DISMISSAL.

SIGNED AT Guatemala City, Guatemala
City State
Francis A. Neuman
Witness

DATE 1 December 1947

[Signature]
Signature of Applicant

SECRET

file

TO : CCD

DATE 30 June 1949

FROM : CSC

SUBJECT: Security and Cryptographic Approval

The following person has been security approved
for the purpose of performing cryptographic duties
as of dates indicated.

<u>Name</u>	<u>Security</u>	<u>Cryptographic</u>
NOEL, James A.	6 January 1944	30 June 1949

John C Bonnet
JOHN C. BONNET
Security Officer SO

SECRET

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25726

2

CONFIDENTIAL

SECURITY OFFICE

Investigation Report

Date: 6 January 1944

Number: 12951

Subject: NOEL, James A.

To: Mr. E. M. Terrell.

1. Investigation directed by: AOT.

2. Sources of information: S.

3. Summary of information:

An American born citizen, 32 years old, son of American born parents.

Subject is a high school graduate and has had twelve years experience in the Foreign Service of the United States Government.

Confidential informants recommend the subject as to loyalty, ability and personal character.

Handwritten: Head. Info. from - 1-8-44
Notified Major M. E. by name...

Handwritten: (Over)

CONFIDENTIAL

(20639)

Page 1

CONFIDENTIAL

3. Summary of information (Cont'd):

4. Remarks:

5. Recommendation:

Security approval recommended, though subject to the receipt of derogatory information at some future date. Interview waived.

Final interview is in this case unnecessary if originating official will provide two (unsigned) passport size photographs and completed fingerprint card of Subject. Par. 6 should be returned with indication of disposition.

J. CW
By A. G. Thomson Date 1/6/44.
Security Officer
A. G. Thomson.

000.

OFFICE OF STRATEGIC SERVICES
WASHINGTON, D. C.

CONFIDENTIAL

206
John W. Sherwood
For Noel File
7

8 January 1944

(2)

MEMORANDUM

TO: Major McDonough
FROM: *J. W. Sherwood*
for W. H. Sherwood
SUBJECT: James A. Noel

Confirming our report by
telephone to your office, the Security
Office has just notified us that clearance
has been granted on Subject.

CONFIDENTIAL

KLOBUKAR, Cecil

Date

FORM 101 USE PREVIOUS EDITIONS

SECRET - SECURITY INFORMATION

CONTRACT PERSONNEL

OFFICE OF PERSONNEL
RETURN FILE TO 5E62, HQS

NOTICE: This is an Office of Personnel File and subject to 10 day limitation period. This file has been charged to Office and is due to be returned to CONTRACT PERSONNEL DIVISION, 5E-63 Hqs., x7841, as of 6-1.

RETURN TO
INCH
JOB 24450

30-0000

☒ UNCLASSIFIED

☐ INTERNAL
ONLY

☐ CONFIDENTIAL

☐ SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Retirement: [redacted]

FROM: Chief, CSPS
CG-10, Hqrs

EXTENSION

NO.

DATE

19 February 1970

TO: (Office designation, room number, and building)

DATE

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. Chief, DO *[Signature]*

25 *[Signature]*

[Signature]

To 1: To avoid any possible misunderstanding and to facilitate staffing plans, please assure prompt attention to the attached memorandum on the scheduled retirement of [redacted]

1 to 5: Subject has been reminded** of retirement and will submit formal application at least 90 days in advance of the date scheduled in the attached memorandum.

3. Chief, CSPS
CG-10, Hqrs

4. Attn: Agent Branch

[Signature]

Personnel Officer

***by dispatch USFS-860 prepared 26 February '70 and field memo addressed to him was attached. Contents of this attachment were contained in body of the dispatch.



JAMES A. NOEL

FORM
3-62

610

USE PREVIOUS
EDITIONS

☐ SECRET

☐ CONFIDENTIAL

☐ INTERNAL
USE ONLY

☐ UNCLASSIFIED

00000
S-E-C-R-E-T

19 February 1970

MEMORANDUM FOR: Chief, DO

SUBJECT : Retirement of [redacted]
under the CSC Retirement System.

1. This memorandum is to remind all concerned that [redacted] GS-16 of your component is scheduled for retirement under the CSC system during the month of March 1971.

2. As you know, the normal retirement date is the last day of the month in which the individual becomes eligible to retire. To insure complete understanding, it is suggested that this matter be again explained to the employee and an appointment be arranged with the Retirement Counseling Branch, Retirement Affairs Division, Office of Personnel, extension 3328, for further discussions or counseling on benefits available upon retirement. Formal application for retirement should be made at least three months prior to the scheduled date.

3. If you should propose to take any steps to retain this employee after his retirement date, your attention is invited to HN 20-324. Any recommendation in that connection will require the concurrence of the Deputy Director for Plans and should be submitted at least 12 months prior and not more than 18 months prior to the scheduled retirement date.

4. If a replacement is required, early notification to CSPS will assist in locating a qualified replacement. (See CSPS Memo No. 15-69, dated 9 July 1969, "Staff Personnel Requisition".)

Robert W. Sheay
Robert W. Sheay
Chief, Clandestine Service
Personnel Staff

S-E-C-R-E-T

GROUP I-Excluded from
automatic downgrading
and declassification

718 July 68

CCS has this memorandum for consideration.

Action is being held up pending

TDY in D. C. beginning 29 July 1968.

Appropriate modifications will be worked out with

CCS at that time.

Montgomery

6 October 1967

MEMORANDUM FOR: Chief, Central Cover Staff

FROM : Chief, [REDACTED]

SUBJECT : [REDACTED]

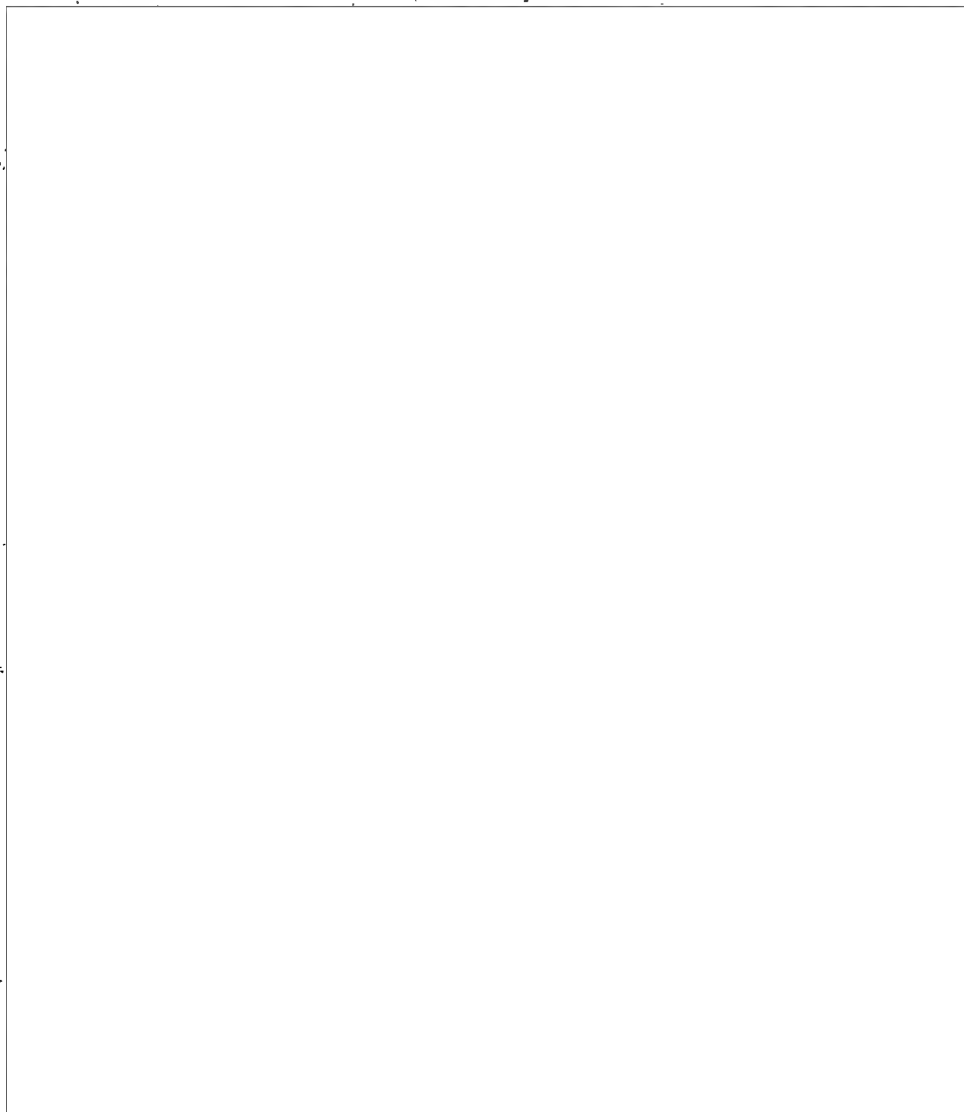
The following paragraphs are keyed to points raised in Form 10-64, 2311.

A. General Information

Submitted by Do/E

SECRET

SECRET



SECRET

SECRET

5. See A. (General Information)

6. None known

7. None known



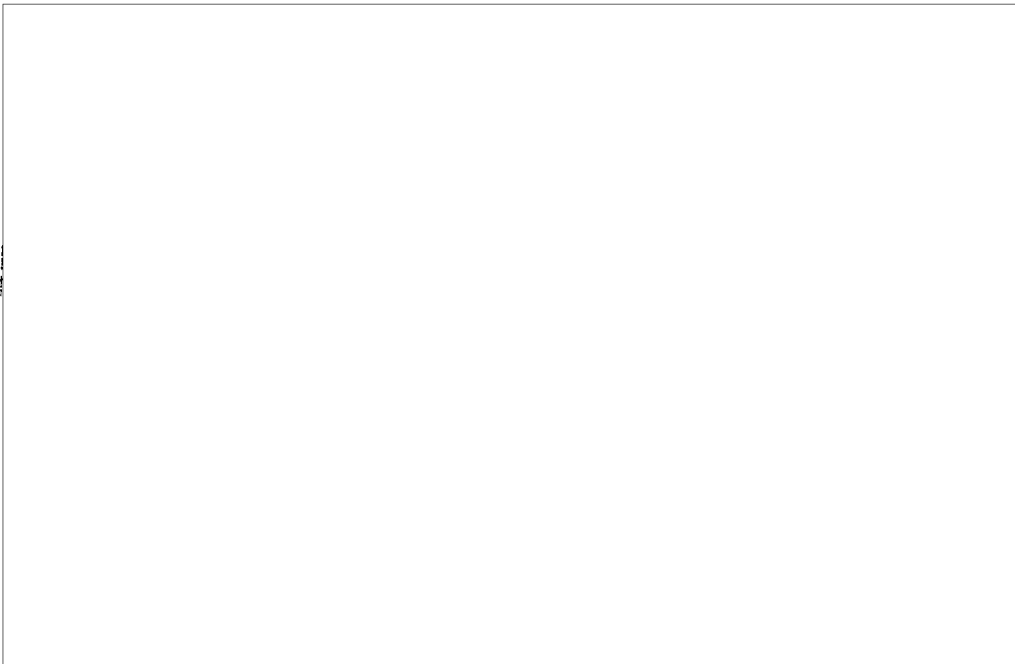
9. N.A.

10. N.A.

11. N.A.

12. N.A.

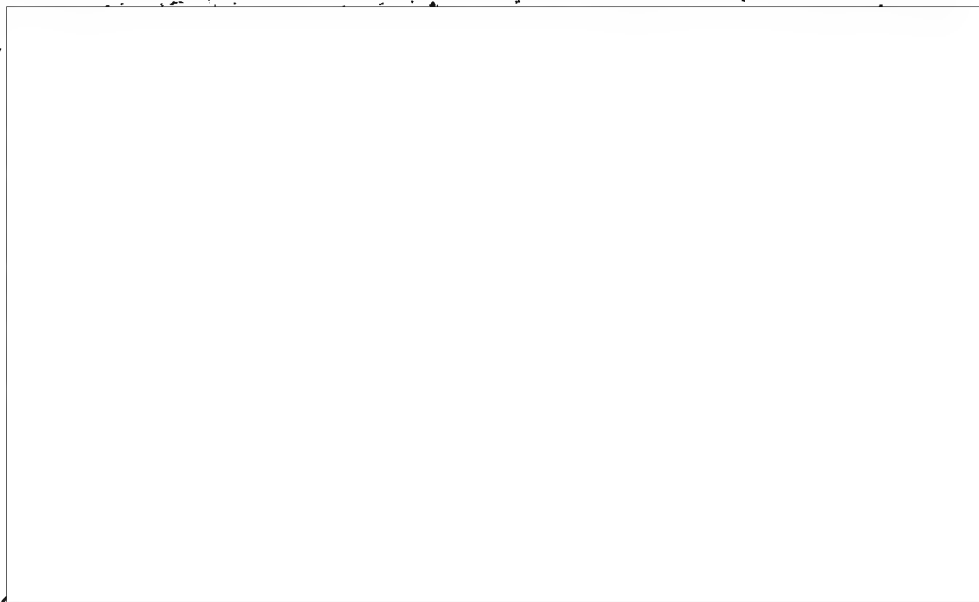
13. N.A.



- 3 -

SECRET

SECRET



- 4 -

SECRET

SECRET

18 March 1968

MEMORANDUM FOR: Chief, Clandestine Services Personnel
Staff

ATTENTION : Mr. Frank De Wald

SUBJECT : Request to Revert to Civil Service
Retirement System - James A. Noel

In accordance with your request there is attached (sterilized)
copy of the original dispatch [redacted]
addressed to the Director of Personnel, in which he requests to
revert to the Civil Service Retirement System. This is forwarded
for appropriate action by C/CSPS.

Virginia C. Lynch
Chief, DO Personnel & Training

Attachment: A/S Above

SECRET

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DISPATCH

SECRET

Chief Personnel

PROCESSING ACTION

TO	Director of Personnel	XX	APPROVAL REQUIRED
INFO	Chief, Domestic Operations		NO QUALIFIED DESK
FROM	Chief of Base, San Francisco		FOR JUDGE INDEXING
SUBJECT	Request to Revert to Civil Service Retirement System		

ACTION REQUIRED - REFERENCES

Reference: USFS-577 dated 21 April 1967

1. On 26 November 1967, I reached the "break even" point between the Civil Service Retirement System and the Organization's System, having completed 36 years and 11 months of Government Service on that date.

2. Since I plan to work until age 60, at which time I will have 40 years of Government Service, it is my desire to revert to the Civil Service System in order to take advantage of the increased annuity under that System.

3. I would appreciate it therefore if you would take whatever steps may be necessary to transfer my retirement account back to the Civil Service Retirement System.

Distribution:
2 - C/DO
2 - C/Personnel

Sign. James H. Keef

in person. Conf. 2

Sign. L. Lyne

C/DO/Personnel

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE
	USFT-1301	26 Feb 1968
	CLASSIFICATION	HQS FILE NUMBER
	SECRET	

SECRET

12 March 1968

Delivered info
4/12/68

MEMORANDUM FOR THE RECORD

SUBJECT: James A. Noel

1. Chief, DO and I talked to Jim Noel this morning about the possibility of his converting from staffer to career agent. After considerable discussion, Jim agreed to the conversion. He is obviously doing this reluctantly, but he appreciates the situation within the DDP in which the encumbrance of senior grades by long-time employees is blocking the promotions of junior officers.

2. Jim urged that he be retained as a career agent until he reaches the age of mandatory retirement (about three years). Chief, DO stated that the need [redacted] for handlers of contacts and assets is such that there would be a continuing need for experienced career agents [redacted]

[redacted] I told Jim that unless he pulled something stupid, he was virtually assured of career agent status until he reached age 60, and perhaps could be employed as a retired annuitant after that time if his performance was productive and if operational requirements remain as they are at present.

3. Jim explained why he could not retire -- the next five years will be difficult for him financially with two teen-age boys to put through college.

4. Chief, DO and Jim will work out the details and timing of his conversion to career agent.

V. L. Gresham
V. L. Gresham
Chief, Operational Services

cc:
DDP
C/DO

V. L. Gresham
Chief, Operational Services
4/12/68

Secret

James A. Noel

Date of birth: 3/19/21 SCD: 1/26/31 ECD: 9/18/47

Estimated retirement annuities:

	<u>CIA</u> <u>31 March 69</u>	<u>CIA</u> <u>31 March 70</u>	<u>CIA</u> <u>31 March 71</u>	<u>CSR</u> <u>31 March 71</u>
Basic Annuity	\$15725 p.a.	\$16398 p.a.	\$16902 p/a	\$18,491 p.a.
Reduced annuity for survivor benefits	\$11424 p.a.	\$15028 p.a.	\$15482 p.a.	\$16912 p.a.
Survivor benefits	\$8649 p.a.	\$9019 p.a.	\$9296 p.a.	\$10,170 p.a.

Memo sent to DOD Pers to advise Noel that he would receive a higher annuity under the Civil Service Retirement rather than the CIA System in view of the amount of his service.

A policy decision has been made that a participant in the CIA Ret System should not later than 18 months prior to his retirement apply to be removed from the CIA Retirement System and transferred to the CSR System.

In order to retire under the CSR System (55-30) he must be under that system for at least one year prior to retirement.

Spillman
4 March 68

Secret

☐ UNCLASSIFIED

☐ INTERNAL
ONLY

☐ CONFIDENTIAL

☐ SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

James A. Noel

FROM:

CSPS/Dowald

EXTENSION:

NO.

Date

24 July 1967

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment)

1.

Virginia Lynch

2.

C/DOD/Pers

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

1- Please see that Mr. Noel gets the attached information as asap. Note para c. If Mr Noel decides to go back to the CSR system, would appreciate routing his request through C/CSPS.

Frank

FORM 3-67

610

USE PREVIOUS EDITIONS

☐ SECRET

☐ CONFIDENTIAL

☐ INTERNAL
USE ONLY

☐ UNCLASSIFIED

SENDER WILL CHECK CLASSIFICATION ON TOP AND BOTTOM			
<input type="checkbox"/> UNCLASSIFIED		<input checked="" type="checkbox"/> CONFIDENTIAL	
<input type="checkbox"/> SECRET		<input type="checkbox"/> SECRET	
CENTRAL INTELLIGENCE AGENCY OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	CSPS, Attn: Mr. Dewald GC-10 Hqs.	21 Feb 67	Q
2			
3	R. Shoup		
4			
5			
6	F. Dewald Jr.	21 Feb 67	Q
<input type="checkbox"/> ACTION		<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> PREPARE REPLY
<input type="checkbox"/> APPROVAL		<input type="checkbox"/> DISPATCH	<input type="checkbox"/> RECOMMENDATION
<input type="checkbox"/> COMMENT		<input type="checkbox"/> FILE	<input type="checkbox"/> RETURN
<input type="checkbox"/> CONCURRENCE		<input type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE
Remarks: <i>F.Y.T.</i> <i>This is the first and only one of this type that we will get for some time -</i> <i>Please return to me</i> <i>DOB - 3/19/11</i> <i>SCD 1/26/31</i> <i>F.</i>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO			DATE
<i>Mr. Dewald Jr.</i> OP/BSO/RB MWhenthall 205 Magazine X2847			
<input type="checkbox"/> UNCLASSIFIED		<input checked="" type="checkbox"/> CONFIDENTIAL	
<input type="checkbox"/> SECRET		<input type="checkbox"/> SECRET	

18 JUL 1967

MEMORANDUM FOR: Mr. James A. Noel

SUBJECT: Retirement Information

1. There are a few situations in which an employee at the time of retirement may have so many years of service (almost 37) that he would receive a higher annuity under the Civil Service Retirement System than under the Organization System. Because of this, the policy decision has been made that a participant in the Organization System who would receive a higher annuity under the Civil Service System may, not later than eighteen months prior to his retirement, apply to be removed from our system and transferred to the Civil Service System. Since you will complete 37 years of Federal service in January of next year it is felt that you should be advised of your retirement status under the Organization System and also if returned to the Civil Service System. The following information is being submitted to assist you in determining which course of action you desire to follow:

a. During the period from 15 August 1944 through 19 October 1946 there were no retirement deductions withheld from your salary. In order for this time to be credited in counting total service under the Organization System it would be necessary for you to make a deposit, with interest, to cover this period. The maximum annuity under our system is 70 per cent based on 35 years of creditable service. If you should return to the Civil Service System in order to receive the maximum annuity it would be necessary for you to make a deposit, with interest, to cover that period for which no contributions were made; however, you may receive full credit in counting total service without making a deposit but your annuity will be reduced by one-tenth of the amount due as deposit.

b. As you are aware, you are presently entitled to apply for voluntary retirement under the Organization Retirement and Disability System. The annuity estimate given below as of 31 October 1967 would be applicable if a deposit were made to cover the period for which no deductions were withheld. The annuity estimate given for 31 March 1968 would be applicable without a deposit since you would have completed 35 years of creditable service at that time without this period of service.

31 October 1967

\$14,265.00

\$13,109.00

\$ 7,848.00

Basic Annuity

Reduced to Provide for

Survivor Benefit

Survivor Benefit

31 March 1968

\$14,640.00

\$13,446.00

\$ 8,052.00

SECRET

SECRET

SUBJECT: Retirement Information

c. If you were to return to the Civil Service Retirement System, you would be entitled to retire under the 35-30 optional provision at any time after you have been back in that system for a period of one year. The Civil Service Regulations state that to retire under the Civil Service Retirement System an employee must have been under that system for at least one year during the two years immediately preceding retirement under that System. Therefore if you should desire to return to the Civil Service System you should submit a request to Headquarters sufficiently in advance of your planned retirement in order to allow time for your request to be acted upon and for transfer to be made effective, as well as allowing for the aforementioned one year required by Civil Service Regulations. The following annuity estimate would be applicable in this situation as of 31 December 1968, assuming a deposit is made:

Basic Annuity	\$15,755.00
Reduced to Provide for Survivor Benefit	\$14,450.00
Survivor Benefit	\$ 8,664.00

2. The above information is being forwarded for your consideration and should not be considered as anything more. If you have any questions regarding the above please feel free to forward them to Headquarters.

B. DeFelice

B. DeFelice

Chief, Benefits and Services Division

7/13/68 - 10:50 AM

Called Virginia Lynch - asking if there is anything or to be done anything for her situation -

She will go out with another dispatch & him and quite person of the memo. DeD memo only mentioned 1 year - we did not say anything. That request must be made at least 18 months prior to retirement date. She will coordinate dispatch with CSRS. **SECRET** - in Bernhart's file 12/13/68/701, informed of this 7/13/68

DoD

SECRET

21 June 1967

MEMORANDUM FOR: JAMES A. NOEL

SUBJECT: Retirement Planning

1. The attached memorandum dated 29 May 1967 from the Director of Personnel concerns current Agency policy on retirement of personnel at age 60.

2. According to our records, you will achieve age 60 on 3/19/71, having completed 40 years 2 months of service. On this basis you would be scheduled to retire on 31 MARCH 1971.

3. If there are any questions relative to your status, please feel free to call Frank J. Deward, Jr., of the clandestine Services Personnel Staff, extension 5476. We also urge you to contact the Retirement Branch, Office of Personnel, extension 2257 as soon as it is convenient for you.


DDF/or

SECRET

ADMINISTRATIVE
INTERNAL USE ONLY

60D
65-16

27 APR 1967

MEMORANDUM FOR : James A. Noel

SUBJECT : Retirement Planning

1. As a participant in the CIA Retirement and Disability System, you will reach mandatory retirement at age 60. The prospect of retirement deserves serious thought and planning because of its impact on each of us and for this reason, we are taking this opportunity to provide you with this advance notice that according to our records you will be required to retire on March 1971.

2. Planning ahead can bring about, with each passing year, definite progress toward your retirement goals and the Agency is anxious to assist you in your retirement planning.

3. We would like to make available to you as much information as possible on the general subject of retirement, your annuity estimates, life and health insurance protection in retirement, opportunities for other employment, Social Security benefits, and other additional material which is available. The Agency feels that this type of information and advisory service should be made available and, hopefully, will be used by employees well in advance of the date of retirement.

4. Our Chief, Retirement Branch, on extension 3257, is available to discuss with you any aspect of your retirement planning and we encourage you to contact him.



Emmett D. Echols
Director of Personnel

ADMINISTRATIVE
INTERNAL USE ONLY

01-360

SECRET

29 MAR 1966

MEMORANDUM FOR: Director of Personnel

THRU : DDP/OP

SUBJECT : PCS Return Prior to Completion of Tour
of Duty - James A. Noel

REFERENCE : CSN-20-59, dated 17 November 1965

1. This memorandum contains in paragraph 2 a recommendation for the approval of the Director of Personnel.

2. Mr. Noel arrived in Madrid as the Chief of Station on 21 September 1961. After home leave, he returned to Madrid on 7 August 1964, for a second tour of duty which would normally be completed on 6 August 1966. We have been advised that upon completion of his current assignment, Mr. Noel will be assigned as Chief of the DODS field office in San Francisco, California. Since the officer now filling that position is required to leave in early September for another assignment, it is very desirable that Mr. Noel arrive in San Francisco about 6 September. Therefore, it is requested that Mr. Noel be permitted to leave Madrid on or about 1 July 1966. This will permit him to take some home leave and arrive at his new post in sufficient time to settle his family, which includes two school age children, and report for his projected assignment on schedule.

Edward Ryan
Acting Chief
Western Europe Division

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

2

**SUBJECT: PCN Return Prior to Completion of Tour of Duty -
James A. Noel**

CONCUR:

See Concurrence on Page 1

DDP/OP

22 April 1966

Date

The recommendation in paragraph 2 is APPROVED:

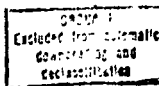
/s/ [Signature]

Director of Personnel

22 APR 1966

Date

SECRET



SECRET

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		DO NOT COMPLETE	
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (trmp)	DATE (from item 8-1)	NAME OF SUPERVISOR (trmp)	DATE (from item 8-2)
James Noel	18 Feb. 1963		
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7a. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
19 Apr 1911	GS-10	Chief of Station	23 September 1961
4. SERVICE DESIGNATION (if known)		5. CURRENT STATION OR FIELD BASE	7b. EXPECTED DATE OF DEPARTURE FROM FIELD
		Madrid	about 10 June 1964
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7c. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
Chief of Station. Overall responsibility for all KUTANK operations and activities in country of assignment.			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 5, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
Return to post for second tour following home leave.			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
None at this time.			

SECRET

<p>8. PREFERENCE FOR NEXT ASSIGNMENT (continued)</p> <p>C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:</p> <p><input checked="" type="checkbox"/> 1 RETURN TO MY CURRENT STATION</p> <p><input checked="" type="checkbox"/> 2 BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:</p> <p>1ST. CHOICE <u>US</u> 2ND. CHOICE <u>WH</u> 3RD. CHOICE <u>—</u></p> <p><input checked="" type="checkbox"/> 2 BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:</p> <p>1ST. CHOICE <u>Hague</u> 2ND. CHOICE <u>Copenhagen</u> 3RD. CHOICE <u>Mexico City</u></p>	
<p>9. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?</p> <p align="right">(INDICATE NUMBER OF WORK DAYS) <u>45</u></p>	
<p>10. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:</p> <p align="center">wife; and two sons, ages (at time of contemplated travel - June 1964) 15 and 13.</p>	
<p>11. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT</p> <p align="center">None - except schooling facilities for children.</p>	
<p>12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.</p> <p align="center">TO BE COMPLETED BY SUPERVISOR AT FIELD STATION</p>	
<p>13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:</p> 	
<p>14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.</p> <p align="center">TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS</p>	
<p>15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:</p> <p align="center">Recommend approval of extension to June 1964. A recommendation regarding a second tour or other assignment will be forwarded to the Panel at a later date.</p>	
<p>16. NAME _____ OR PERSONNEL OFFICER</p> <p>DATE <u>11 April 1963</u></p>	<p>SIGNATURE <i>[Signature]</i></p>
<p>FOR USE OF CAREER SERVICE</p>	
<p>17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT</p>	<p>18. REFERENCE</p> <p>DISPATCH NO. _____ CABLE NO. _____</p>
<p>19. TYPED OR PRINTED NAME</p>	<p>20. SIGNATURE</p>
<p>21. TITLE</p>	<p>22. DATE</p>
<p>23. COMMENTS</p> 	

SECRET

SECRET

REF 8-1955

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1-2)	NAME OF SUPERVISOR (true)	DATE (from item 1-2)
James A. NOEL	11 Jan 55	J. C. KING	26 Jan 55
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
<i>Bel Bonne</i>			2/7/55
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
11 March 1911	GS-15	Chief of Mission	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		
KUFIHE SD-FI	Caracas		
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7. EXPECTED DATE OF DEPARTURE
None			September 1955
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>Chief of Mission at Caracas. Supervisory jurisdiction over Supervision of all KUMARK activities Liaison with Ambassador, Service Attachés, and Embassy section heads; Projects and plans.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
<p>A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.</p> <p>First preference: Branch Chief in WH Division</p>			
<p>B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):</p> <p>CE Course Communist Party Operations Operational Security</p>			

SECRET

<p>9. PREFERENCE FOR NEXT ASSIGNMENT (continued)</p> <p>C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 IN THE BOXES BELOW:</p> <p><input checked="" type="checkbox"/> RETURN TO MY CURRENT STATION <input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY</p> <p><input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION</p> <p>WITH RESPECT TO A POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE YOUR 1ST, 2ND AND 3RD CHOICE FOR GEOGRAPHIC AREA OR SPECIFIC STATION:</p> <p>1ST CHOICE: <u>Mexico City</u></p> <p>2ND CHOICE: <u>Santiago</u></p> <p>3RD CHOICE: <u>London</u></p>		<p>OFFICE OF PERSONNEL</p> <p>FEB. 8 2 24 PM '55</p> <p>MAIL ROOM</p>
<p>10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?</p> <p><u>45 work days</u> INDICATE NUMBER OF WORK DAYS <u>45</u></p>		
<p>11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:</p> <p><u>Wife, 43; two children, 6 and 4.</u></p>		
<p>12. SIGNATURE: COMPLETE ITEM NO. 9-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.</p> <p>TO BE COMPLETED BY SUPERVISOR AT FIELD STATION</p>		
<p>13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:</p>		
<p>14. SIGNATURE: COMPLETE ITEM NO. 9-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.</p> <p>TO BE COMPLETED BY APPROPRIATE SUPERVISOR AT HEADQUARTERS</p>		
<p>15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE DIVISION TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:</p> <p>I concur in subject's expressed preference for next assignment and recommend that he be given the training courses listed in 9B.</p>		
<p>16. NAME OF SUPERVISOR</p> <p>J. C. KING</p> <p>TITLE:</p> <p>CHIEF, WH DIVISION</p>	<p>SIGNATURE:</p> <p><i>J. C. King</i></p> <p>DATE:</p> <p>26 January 1955</p>	
<p>17. REMARKS (additional comment)</p> <p>This officer, who will have been with the Agency for nine years on the completion of his present tour, never has had a Headquarters assignment. His performance in the field has been excellent and his long experience will make him a valuable addition to WH Headquarters staff.</p>		

SECRET

- INSTRUCTIONS: 1. PERMIT FOR: 2. CONTRACT EMPLOYEES (TYPE A, B AND CAREER)
 3. INDEPENDENT CONTRACTORS UNDER WRITTEN CONTRACT OR MOC (US CITIZENS OR RESIDENT ALIENS ONLY)
 4. THIS FORM IS NOT APPLICABLE FOR OPERATIONAL OR FIELD AGENTS
 5. COPIES OF THE FORM WILL BE RETAINED BY THE ORIGINATING COMPONENT (NUMBER OF COPIES AT ITS DISCRETION) AND BY CSRS/AGENT FRANCHISE (COPY ONLY)

NAME (LAST, FIRST, MIDDLE) [REDACTED]			SEX MALE	DATE OF BIRTH 12 March 1911	
MARITAL STATUS Married	NO. DEPENDENTS 2	YEAR(S) OF BIRTH 1911 and 1951	NATIONALITY U.S.	LAST MEDICAL EXAM Dec. 1967	
DATE OF LATEST SECURITY/OPERATIONAL APPROVAL 3 April 1968		JOB TITLE Ops Off		COMPONENT DO	
CONTRACT CATEGORY Career Agent	EFFECTIVE DATE 4 Aug. 1968	EXPIRATION DATE NA	SALARY 30,054	GRADE EQUIVALENT GS-16/7	PROJECT OR FAN # [REDACTED]
BENEFITS			YES	NO	
SOCIAL SECURITY FECA DEATH AND DISABILITY ANNUAL AND SICK LEAVE			YES YES YES	NO	
CIVIL SERVICE RETIREMENT CIA RETIREMENT OR COMMERCIAL CIA ANNUITY FEDERAL EMPLOYEES GROUP LIFE AND HEALTH INSURANCE			YES	NA	
CONTRACT LIFE AND HEALTH INSURANCE			YES	NO	
MISSING PERSONS BENEFITS			YES	NO	
OTHER (EXPLAIN) UNLIC. WARPA, DENTAL DISEASE & ASS'N			YES		

NON-CIA EDUCATION/RESEARCH PLAN

High School Graduate

DATES	NON-CIA EMPLOYMENT			
FROM - TO	EMPLOYER	LOCATION	FUNCTION	SALARY
1931 - 1936	Dept. of State	Mexico	Vice-Consul	
1936 - 1941	" "	"	" "	
1941 - 1944	" "	"	" "	
1944 - 1947	CSS/SSU/CIC	Spain & Guatemala	COS	

CIA TRAINING

DATES	CIA EMPLOYMENT HISTORY (BEGINNING WITH CO)					
FROM - TO	FUNCTION	CONTR. CAT.	LOCATION	PROJECT	SALARY	GRADE
4 Aug 1968	Ops Off	Career Agent	San Francisco	[REDACTED]	26,540	15/6
					30,054	16/7
					31,857	

SECRET

00000
FACTORS AFFECTING SUBJECT (PUBLIC EXPOSURE - PRESS, RADIO, TV), KNOWN OR SUSPECTED IDENTIFICATION TO OTHER THAN CIA STAFF PERSONNEL, INTELLIGENCE, OR SECURITY SERVICES

If such factors exist, they have not affected his performance in his present assignment. He is far removed geographically from his overseas assignment.

COVER

ADAPTABILITY (SUBJECT AND FAMILY) TOWARDS DUAL LIFE

Excellent

B. PREVIOUS COVER WAS: ☒ OFFICIAL ☐ NON-OFFICIAL (GIVE BRIEF DESCRIPTION IF NOC)

MOBILITY

INDICATE LIMITING FACTORS BOTH PERSONAL AND OPERATIONAL

None

FUTURE UTILIZATION

INDICATE PLANS OR RECOMMENDATIONS FOR USE AFTER CURRENT ASSIGNMENT

This is [] last tour as he reaches the mandatory retirement age in March 1971.

SECRET

05592		BIOG. PROFILE (PA. 1000)		DOD: 24 Jan 1967	
NAME: James Arthur		DATE OF BIRTH: Mar 1911		DATE OF DEATH: 18 Sep 1967	
NATIONAL STATUS: Married		US NATURALIZATION CATEGORY: 3		1911-1912-1951	
STATUS: Jul 1954		Sep 1966		TDY Standby	
CURRENT: None		RELEASE TO: None		TO BE: Retired	
ASSESSMENT DATE: None		TO: Proposed		TO: Language Aptitude Test Date	
13. NON-CIA EMPLOYMENT					
1931-33 Dept of State, Encarnacion, Mexico - Vice Consul					
1933-41 Dept of State, Mazatlan, Mexico - Vice Consul					
1941-44 Dept of State, Guadalajara, Mexico - Vice Consul					
1944-47 OSS/SSU/CIC, Spain and Guatemala - Chief of Station					
14. NON-CIA EDUCATION					
High school graduate					
15. FOREIGN LANGUAGE ABILITIES					
Spanish - R High; W Intermed - Apr 1958 P, U, High; S, Inter: Interp & Trans Apr 1957.					
16. AGENCY SPONSORED TRAINING					
1947 Invest Tech 1949 SAIC 1956 Basic Supervision					
1947 Photo 1949 AIC 1956 Cland Pol Warfare					
1947 Commo Trng 1949 Documentation					
1949 Famil in Sound Surveill Equip 1952 Psych Warfare					
1949 Intel Orient 1952 Cland Pol War					
17. CIA EMPLOYMENT					
TODAY: 24 Jan 1967 (Personnel Actions, Military Orders, or Principal Details)					
EFFECTIVE DATE POSITION, TITLE & CCLP GRADE SO ORGANIZATION & ORG. LOCATION					
Sep 1947	I.O.	0132.00	12	OSO/FBT/COS	Guatemala
Mar 1949	"	0132.00	13	" " "	"
Aug 1949	I.O. (Stf)	0132.00	13	OSO/FBT/CCOM	Buenos Aires
Dec 1950	"	0132.00	13	OSO/FBT/COS	"
Aug 1951	I.O.	0132.00	14	OSO/FBT/EC/COS	"
Sep 1952	"	0132.00	14	WH-I/COM	Caracas
Aug 1954	Area Ops Off	0136.01	15	DDP/WH-I/CCS	"
Jan 1956	"	0136.01	15	DDP/WH/Ch, Br-I, NWC	Eq
Jun - Jul 1956	TDY South America				
Jun 1957	Area Ops Off	0136.01	15	DDP/WH Ch, Br-II	"
Sep 1953	"	0136.01	15	DDP/WH-III/HavanaCubaSta/CCS	Havana
Mar 1950	Ops Off	0136.01	16	"	"
Sep 1951	Chief of Station	0136.01	16	DDP/WH/CCS	Madrid
Jun 1965	"	0136.05	16	"	"
Aug 1966	Chief of Base	0136.08	16	DDP/DOE/USF/USSta	San Francisco
Oct 1967	"	0136.08	16	DDP/DOE/USF/Intel Ops Grp	"
18. DATE REVIEWED		19. PROFILE REVIEWED BY		20. ITEMS 18-19 REVIEWED & VERIFIED BY EMPLOYEE	
13 Feb 1968		hms/hc		No	

FORM 1200 (PART 1) USE PREVIOUS EDITIONS. SECRET PROFILE

SECRET

(When Filled In)

Plot. Serial No.

55292

BIOGRAPHIC PROFILE (Form 2)

Name (Last-First-Middle)

NOEL, James Arthur

Date of Birth

Mar 1911



20. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE

21. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL

22. ADDITIONAL INFORMATION

Appreciation 1954 from Administrator, Bureau of Inspection, Security & Consular Affairs, Dept of State for security assistance furnished during the Tenth Inter-American Conference at Caracas, Venezuela.

Commendation 1952 from Chief, WH Division for superior performance during the Cuban crisis.

Admonition 1963 from C/WH for part in command failure in control and supervision of a sensitive operation.

23. DATE REVIEWED

20 Apr 1966

24. PROFILE REVIEWED BY

hms/nc

FORM NO. 1200 (PART 2) REPLACES FORM 1000 1-55-7 22 SECRET

PROFILE

(4)

SECRET RYBAT

12 May 1970

Memorandum in Lieu of Fitness Report for [REDACTED]
for the Period 31 March 1969 to 31 March 1970

[REDACTED] is cost conscious in the expenditure of operational funds; he does not have supervisory responsibilities.

SECRET RYBAT

SECRET RYBAT

Page 2

[REDACTED]

his performance has been Strong.

Signed in [REDACTED] on 45a on 12 May 1970
Chief of Base, [REDACTED]

[REDACTED] by employee on 12 May 1970

Employee

I concur with the rating and narrative comments. Subject has
done remarkably well in establishing himself [REDACTED]

REVIEWING OFFICIAL:

Signature

C/DOI/1

11 June 1970

Date

SECRET RYBAT

CAREER AGENT

SECRET RYBAT

att. USFT-1478

27 May 1969

Memorandum in Lieu of Fitness Report for
for the Period 26 July 1968 to 31 March 1969

1 SECRET RYBAT

SECRET

RYBAT

att & USFT-1498

Page 2

[REDACTED]

[REDACTED] is cost-conscious in the expenditure of operational funds; he does not presently have any supervisory responsibility.

As has been indicated above, [REDACTED] has been given a very difficult primary target [REDACTED]

[REDACTED] While it has been a frustrating and sometimes exasperating assignment, [REDACTED] has shown both initiative and perseverance in attacking it; his performance has been Strong.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

10 June 1969

Date

Title

SECRET RYBAT

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) Noel James A.			2. DATE OF BIRTH 3-19-11	3. SEX M	4. GRADE GS-16	5. SD D	
6. OFFICIAL POSITION/TITLE Chief of Base			7. OFF/DIV/BR OF ASSIGNMENT DDP/DOD		8. CURRENT STATION San Francisco		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR				
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE				
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to-) 1 April 67 - 31 March 1968				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Chief of Base supervising six professional and three clerical subordinates.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Establishment and maintenance of operational support mechanisms.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Operational reporting.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Liaison with FBI and DCS, et al.						RATING LETTER S	
SPECIFIC DUTY NO. 5 Direction of recruitment and handling of support assets.						RATING LETTER S	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Noel is much too experienced and practiced a hand for his performance to vary very much from year to year. He has continued to turn in the highly creditable performance in San Francisco that has been standard for him for many years. He has managed his subordinates well and has exercised uniformly good judgment in directing their operational efforts. Of particular value has been his steadiness in the face of administrative adversity disrupting the organization of his Base. Mr. Noel insured that the work of the Base continued uninterrupted and demonstrated his capacity to keep on top of all details and report them to Headquarters as appropriate. It is a credit to Mr. Noel that in the post-Ramparts exposure period there was not a single instance of an academic asset withdrawing from a relationship with the Base.

The performance of his officers attests the careful guidance and wise leadership which has enabled them to operate securely and well in sensitive areas. His relations with the FBI and DCS are excellent. He is appropriately economy minded. In short, he is a decidedly strong supervisor.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

18 months

Mr. Noel is in the Field and will be shown a copy of this Fitness Report on his next TDY trip to Headquarters.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

15 July 1968

C/DO/I

Stanley H. Gaines

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur in rating officer's judgment.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

17 July 1968

Chief, DO Division

(Signed) Gordon L. Jorgensen
Gordon L. Jorgensen

SECRET

SECRET
(When Filled In)

DC

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				055292	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
Noel, James A.			3/19/11	M	16 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Chief of Base			DDP/DOD San Francisco		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			INITIAL <input checked="" type="checkbox"/> ANNUAL SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 October 1966 - 31 March 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Chief of Base supervising six professional and three clerical subordinates.					B
SPECIFIC DUTY NO. 2					RATING LETTER
Establishment and maintenance of operational support mechanisms.					B
SPECIFIC DUTY NO. 3					RATING LETTER
Operational reporting.					B
SPECIFIC DUTY NO. 4					RATING LETTER
Liaison with the FBI and DCS, et al.					B
SPECIFIC DUTY NO. 5					RATING LETTER
Direction of recruitment and handling operations.					B
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					B

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Noel is an old hand at running Bases or Stations abroad and his performance as Chief of Base, San Francisco, amply attests that. It goes without saying that he understands all aspects of the business, knows how to delegate, organize, direct and report. He has continued to do all these things well. His seniority, experience and maturity served the Agency in particularly good stead during this period when the location of his Base was compromised in the public press, through no fault of Mr. Noel. His subsequent and consequent actions were all taken with sound judgment and appropriate calm and circumspection. He was also most receptive to, and cooperative in, Headquarters suggestions in this matter. He is, of course, cost conscious and an excellent supervisor. His overall performance is that of a high order of senior Agency officers.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6 months	Subject is in the field; a copy of this report is being retained to show him on his next TDY to Hqs.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
21 August	C/DO/I	(signed in draft) Stanley H. Gaines
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Concur fully in overall rating of "Strong".		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 August 1967	Chief, DO Division	Borden L. Jorgensen

SECRET

SECRET

21 July 1966

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: James A. Noel, Employee Serial No. 055292, DDP/EUR,
Period: 1 April 1965 - 1 July 1966, SD: D, YOB: 1911

1. Subject, who was born 19 March 1911, is a GS-16 and has been assigned to Madrid as Chief of Station since October 1961.

2. Subject is an experienced and mature officer dedicated to the Agency's mission. Conscientious and diligent, he readily accepts responsibility and is both thorough and reliable in the performance of his duties. Morale at his station has been consistently high, and Subject enjoys the respect and confidence of his subordinates. He evidences sound and objective judgment and operates well under pressure. In all aspects of the station's activities, he exhibits a high degree of cost consciousness in the expenditure of Government funds and property.

3. Subject's performance has been Strong throughout the rating period and he has obtained a maximum effort from his subordinates. He has enjoyed the confidence of the Ambassador and the other senior Embassy officials, all of whom have demonstrated considerable dependence upon the station.

Rolfe Kingsley
Rolfe Kingsley
Chief, European Division

Concur
131 H DDP (T.M.)
26 July 66

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				059292	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
MOSE, James A.		19 March 1911	M	GS-16	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Chief of Station		DDP/WE/Derian		Madrid	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From- to-)			
		1 April 1965 - 27 September 1965			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1					
My rating of the performance of this officer remains the same as the description of his performance which is contained in his fitness report for the period ending 31 March 1965.					
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					B

SECRET

OFFICE OF PERSONNEL

(When Filled In)

SECTION C		
NARRATIVE COMMENTS		
<p>Indicate significant strengths or weaknesses demonstrated in current position. Give their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>MAIL ROOM</p>		
SECTION D		
CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Mr. Noel is currently at his overseas post.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
27 September 65	Chief, WE Division	William D. O'Ryan
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19 OCT 1965	ADDP	Thomas H. Karamessines

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12 May 1965

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: James A. Noel, Employee Serial No. 055292
Fitness Report for the Period 1 April 1964
to 31 March 1965

1. Subject, who was born 10 March 1911, is a GS-16 and has been assigned to Madrid as Chief of Station since October 1961.

2. As Chief of Station, he is charged with the organization and management of the station and is responsible for the planning, direction, and supervision of all its activities. He also exercises general supervision of the Barcelona base. Assisting him and under his general supervision are [redacted] contract employees.

3. Subject serves as the Ambassador's principal intelligence officer, as chairman of the Embassy Defector Committee, as the Agency representative on the Embassy Country Team, and as the coordinator of U.S. clandestine intelligence operations in Spain. Accredited as the Agency's representative to

[redacted]

4. Subject is an experienced and mature officer, possessing an excellent command of Spanish. Highly motivated, conscientious, and industrious, he readily accepts responsibility and is both thorough and reliable in the execution of his duties. Even tempered and affable, he holds the confidence and friendship of those whom he directs and those to whom he is responsible, and the morale of his station is noticeably high. He is alert to the operational possibilities

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of any given situation, evidences sound and objective judgment, and works well under pressure. He writes lucidly, speaks articulately, and exhibits a high degree of cost consciousness in the use of government funds and property. His delegation of responsibility to others is meaningful and well delineated.

5. Subject's performance has been strong throughout the rating period. He has given the station purposeful direction and competent management and as an effective supervisor who commands the loyalty and respect of those whom he supervises, he has succeeded in obtaining a maximum effort from the station personnel. He enjoys the confidence of the Ambassador and other principal officers of the Embassy, several of whom have expressed their appreciation of subject's work and commented on the value of the station's contribution to the functioning of the Embassy. The fact that the Ambassador arrived in Madrid with definite prejudices regarding the Agency but was of quite another mind upon his departure is testimony to subject's skill and tact.

7. In addition to his considerable executive and liaison duties, subject has carried out the previously cited operational assignments with marked ability. He is a convincing and persuasive agent handler, and his operational reporting is prompt and thorough.

8. The only criticism I would make of subject is that I believe the station should be making a greater effort

Original Signed
WHR:b00

EDWARD RYAN
Deputy Chief
Western Europe Division

OVERALL PERFORMANCE IN CURRENT POSITION: "S"

COMMENTS OF REVIEWING OFFICIAL: CONCUR

MAJCE OL QKZ 20WJE
William D. O'Ryan, C/WE

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292	
SECTION A GENERAL					
1. NAME (Last) NOEL, James (First) A (Middle)		2. DATE OF BIRTH 1911	3. SEX M	4. GRADE 16	5. SO D
6. OFFICIAL POSITION TITLE Chief of Station, Madrid		7. OFF/DIV/RR OF ASSIGNMENT DDP/WE/Iberia		8. CURRENT STATION Madrid	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 April 1963 - 31 March 1964		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 As Chief of Station, Madrid, plans and directs all FI, and CA operations within Spain					RATING LETTER P
SPECIFIC DUTY NO. 2 Supervises Madrid Station and Barcelona Base personnel					RATING LETTER P
SPECIFIC DUTY NO. 3 Maintains contact with senior officials					RATING LETTER S
SPECIFIC DUTY NO. 4 Represents the Director of CIA with the Ambassador to Spain and other U.S. officials in Spain					RATING LETTER O
SPECIFIC DUTY NO. 5 Personally handles several sensitive operations.					RATING LETTER S
SPECIFIC DUTY NO. 6 Supervises					RATING LETTER O
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject is one of the Agency's truly mature, experienced operations officers. He has had unusual operational experience in Central and South America, both in the field and in Headquarters. His activities have spanned both the FI and the CA spectrum. He has and does deal easily and graciously with high ranking officials, both American and foreign. His good sense, poise and dignity never fail to impress. He is a person of principal and high morals. He does not hesitate to express his conviction even though he may have reason to believe such convictions are not popular. He is a strong supervisor who enjoys his subordinate's respect. He is economy minded and made diligent efforts to comply with requests to economize. Mr. Noel has succeeded in creating a cohesive station in Madrid.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

20 April 1964

Chief, WE/5

Fred E. Hubbard

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

Smaybey

CWE

W. D. H. H.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292	
SECTION A				GENERAL	
1. NAME (Last) NOEL, James A. (First) (Middle)			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE 08 16
5. OFFICIAL POSITION TITLE Chief of Station			7. OFF/DIV/BR OF ASSIGNMENT DDP/WX/Iberian Br.		8. CURRENT STATION Madrid
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 22 April 1963			12. REPORTING PERIOD (From- to-) 1 April 1962-31 March 1963		
SECTION B					
PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Direction of all FI and CA operations.					RATING LETTER S
SPECIFIC DUTY NO. 2 Administration of Station and supervision of personnel.					RATING LETTER S
SPECIFIC DUTY NO. 3 Direct supervision of senior ops officer 					RATING LETTER S
SPECIFIC DUTY NO. 4 Personally handles a sensitive operation of interest to another CS component.					RATING LETTER S
SPECIFIC DUTY NO. 5 Maintains contact with senior personnel.					RATING LETTER S
SPECIFIC DUTY NO. 6 Maintains a working relationship with the Ambassador and other U. S. officials.					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Noel has ably administered a large Station and has displayed maturity, good judgment and tact in the day-to-day management and direction of Station activities and personnel. This has been achieved despite the physical location of Station staff personnel [redacted]

Under the direction of Mr. Noel a far reaching and fruitful major operational program against the high priority [redacted] has been undertaken and Madrid Station today is making a substantial contribution in good operations and good intelligence information to the over-all Agency effort. Another notable accomplishment directly attributable to Mr. Noel, and in part a reflection of his long years of service in Latin America, has been his professional handling personally of the Station operation involving [redacted]. Interested CS components have stated categorically that Madrid Station coverage of [redacted] and his activities is essential in satisfying existing intelligence requirements on [redacted].

Despite the Station's heavy diversion into [redacted] Latin American activities and [redacted] activities, Mr. Noel has encouraged the development of a long-range program involving activities against the [redacted] Communist Party and clandestine contact with the [redacted] political opposition.

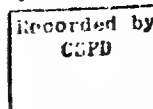
SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
19	Subject employee is in the field. Report will be shown to him upon his return to Headquarters.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
25 APR 1963	DC/IE	[redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur in above assessment.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
25 APR 1963	C/IE	William D. O'Ryan

SECRET

BAT



17 April 1962

MEMORANDUM FOR: Acting Chief, WE

SUBJECT : Mr. James A. Noel
Fitness Report Covering the Period 14 August 1961 to
31 March 1962

1. Mr. Noel assumed his duties as Chief of Station, Madrid on 23 September 1961. The Station, as constituted when Mr. Noel arrived, included some [] plus numerous contract personnel, as well as a []. The Madrid Station proper not only includes the Embassy installation but an outside operations section as well. Since Mr. Noel arrived the Station has been launched into a [] operations program of considerable scale and on a crash basis. In addition, in this period, [] and the experienced Chief of [] had to be brought home due to a family emergency.

2. To date Mr. Noel has given every evidence of a particular ability to cope with the crash program and the acute shortage of personnel with judiciousness and maturity. While it is too early, yet, to pass judgement, there are indications that Mr. Noel has been preoccupied []

3. As indicated above, Mr. Noel has not been in place as Chief of Station long enough to justify firm reservations concerning his management, nor to permit meaningful criticism. Also, as indicated above, his outstanding noticeable strength to date has been his ability to cope with a heavy operational program, a shortage of personnel, and a sometimes difficult operational climate, with judgement, calmness and patience.

THOMAS F. THIELE
Chief, WE/5

CONCUR:

Y. M. D. O. []/AC/WE

BAT

Contract Service

<u>Date</u>	<u>Action</u>	<u>Compensation</u>	<u>GS</u> <u>Equivalent</u>
Former Staff Employee			
4 Aug 68	Continued Employee Career Agent with Civil Service Retirement, LPAs and PAs.	\$26,640	GS-16/6
13 Jul 69	LPI	29,219	GS-16/6
5 Oct 69	PSI	30,054	GS-16/7
28 Dec 69	LPI	31,857	GS-16/7
10 Jan 71	LPI	33,757	"
31 Mar 71	Contract terminated (Subject retired)	33,757	"

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER		2 NAME (Last, First, Middle)		3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT	
				CONTRACT TERMINATION (00H0000)		NO - 16 03 31 71		CAREER AGENT (S)	
6 FUNDS		7 TO 10		7 TO 10		7 TO 10		8 EMP OR OTHER LEGAL AUTHORITY	
						1125-3507			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION			
DDP DIRECTORATE DOMESTIC OPERATIONS DIV						UNITED STATES OF AMERICA			
11 POSITION TITLE						12 POSITION NUMBER		13 EMPLOYER SERVICE DESIGNATION	
OPS OFFICER									
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE		
(FULL TIME) GS			J-26.00		16 7		DOG: 032060 LEI: 100569		
<p align="center">----- STATUS INFORMATION -----</p> <p>BIRTH DATE: SEX: M MARITAL ST: MAR NO. DEPENDENTS: 03 CITIZENSHIP: US/BIRTH LONGEVITY COMP: 091847 FED SERVICE COMP: 012631 TYPE RETIREMENTS: CSC/FICA HOSPITALIZATION: F PLAN: FEGLI: YES PREV. GOVT SERV: 4 SAL. TASK LIMIT: PAY BASIS: A M/L INC: 0 S/L INC: 4</p> <p align="center">----- CONTRACT INFORMATION -----</p> <p>EFF DATE: 08068 EXPIRATION DATE: 08037 DATE ORIG CONTRACT: 080468 REFERRING OFFICER: DDL PERSONNEL REF# GRG: BOD PHONE: 3376</p> <p align="center">----- ENTITLEMENTS/ELIGIBILITIES/ALLOWANCES -----</p> <p>TAX STAFF: Y FED EXMP: STATE EXMP: STATE: TRAVEL: NHN CPS EXPENSE: Y HOUSING: N POST/EQUAL: N HOME LEAVE: C DIFFERENTIAL: N OFFSET CLAUSE: Y STD GOVT: N LEGISL PAY: Y PREMIUM PAY: N ALLOWANCE COMB: N EDUCATION: N STEP INCRS: Y OTH. TAX ENTL: N OTHER ALLOWNS: N SEPARATION: N</p>									
<p>NOTE: ITEMS PRECEDED BY AN ASTERISK * REFLECT CHANGED DATA</p> <p align="center">SIGNATURE OR OTHER AUTHENTICATION</p>									

Form 11508
7-66 MFG 11-69

Use Serious
Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(451)

SECRET

7 April 1971

MEMORANDUM FOR: OF/C&TD/CAS

VIA : Contract Personnel Division

SUBJECT :
Retirement

Career Agent, retired
effective 31 March 1971 under the Civil Service
Retirement System. This memorandum authorizes
the payment by the Office of Finance of any money
due him.

Paul S. Latchford
Chief, DO Personnel

CONCUR:

/s/ Don H. Luetsch 14 APR 1971

Chief, Contract Personnel Division
Distribution:

Orig & 1 - Addressee
1 - CPD
1 - Subject's File

1 - DO/Pers Chrono
DO/Pers, (7 Apr 71) 3193

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

CLEARANCE SHEET FOR TERMINATION OF CONTRACT PERSONNEL				DATE
THIS FORM MUST BE SIGNED AND SUBMITTED IN DUPLICATE				22 March 1971
PERSONAL DATA				
NAME			OFFICE AND BRANCH OF ASSIGNMENT	
LOCAL			DO Division	
PERMAN			PERMANENT ADDRESS	
			San Diego, California	
			POSITION OR FUNCTIONAL TITLE	
			dOps Officer	
CONTRACT DATA				
DATE CONTRACT EFFECTIVE		DATE CONTRACT LAST RENEWED		DATE CONTRACT EXPIRES
8/4/68				Indefinite
				DATE OF CONTRACT TERMINATION
				3/31/71
REASON FOR CONTRACT TERMINATION				
Subject is retiring effective 31 March 1971.				
INTERNAL STAFF OR DIVISION CLEARANCES (Add or delete as applicable)				
COMPONENT	CLEARED BY	DATE	REMARKS	
FINANCE	Mr. Randall			
LOGISTICS				
PERSONNEL	Mr. Latchford			
Registry				
CONTRACT APPROVING OFFICER		CLEARED BY (Signature)		DATE
		Carroll L. Hauver, C/DO/80		
SCHEDULE OF INTERVIEWING OFFICES				
(OFFICES NOT REQUIRING INTERVIEW WILL SO INDICATE)				
OFFICE	SCHEDULE			INTERVIEWING OFFICIAL
	DATE	TIME	LOCATION	
CENTRAL COVER STAFF				CLEARED BY (Signature)
				DATE
OFFICE OF SECURITY PSD				CLEARED BY (Signature)
				DATE
OFFICE OF PERSONNEL CPD				CLEARED BY (Signature)
				DATE
REMARKS (Please Initial)				
<p>APPROVED:</p> <p>/s/ Dow H. Luotscher</p> <p>Special Clearing Officer</p>				
STAFF OR DIVISION AND BRANCH OF ASSIGNMENT		SIGNATURE OF STAFF OR DIVISION RESPONSIBLE OFFICER		DATE
DO Division		Paul S. Latchford, C/DO/Personnel		

SECRET

8 MAR 1971

MEMORANDUM FOR: CSPS/Agent Panel**VIA : Central Cover Staff****VIA : Office of Security****VIA : CI Staff****SUBJECT : Summary of Employment
Mr. James A. Noel**

Attached hereto is Mr. Noel's Summary of
Employment for approval and permanent record.

Carroll L. Hauver
Carroll L. Hauver
Chief, DO Support Group

Attachment:
As Stated

CONCURRENCE:

<u>Ray L. Muller</u>	(CSPS Agent Panel)
<u>CR. S. [illegible]</u>	(Central Cover Staff)
<u>[illegible]</u>	(Office of Security)
<u>[illegible]</u>	(CI Staff)

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SUMMARY OF EMPLOYMENT

James A. Noel

--

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST
2. NAME (Last, First, Middle) Bool, James A. (T) Career Agent		10 February 1971
3. POSITION TITLE Ops Officer		4. GRADE GS-16
5. OFFICE, DIVISION, BRANCH		6. EMPLOYEE'S EXT.
7. PURPOSE OF EVALUATION		
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HDQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px;"> ETD STATION San Francisco TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px;"> ETA STATION NO. OF DEP.'S </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		SIGNATURE <i>[Signature]</i> ROOM NO. & BUILDING 201 Key EXT. 3193
10. COMMENTS Subject will retire effective 31 March 1971. He will come to Headquarters and be available for a medical examination on 22 March. Please schedule the medical during that week. DO is requesting approval for him to enter the Hq building.		
11. REPORT OF EVALUATION		
DATE 31 March 1971		SIGNATURE FOR CHIEF OF MEDICAL STAFF CMS/pro

FORM 259 USE PREVIOUS EDITIONS

SECRET

(20)

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
		(Career Agent)		DDP/DO		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS-16	6	\$29219	10/08/67	GS-16	7	\$30054	10/05/69	X	
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				28 Oct 69					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS						AUDITED BY			
						<i>Sup # 115FT</i> <i>1535</i> <i>13 Oct 69</i>			
FORM 560 E Use previous editions									
PAY CHANGE NOTIFICATION									

WWM

(4 31)

22 April 1969

MEMORANDUM FOR: OP/PAB

SUBJECT : - Career Agent

Attached is a copy of USPT-1477 dated 4 April 1969
in which subject requests cancellation of his optional
FEGLI plan to be effective 3 May 1969.

/S
Virginia C. Lynch
Chief, DO Personnel and Training

Attachment: USPT-1477 and authorization

CC - OP/C&ED/BA/S
CED

MAILED
APR 23 1969
U.S. DEPT. OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL
WASHINGTON, D.C. 20530

OK
104

DISPATCH		CLASSIFICATION SECRET	PROCESSING ACTION
TO	Chief, Domestic Operations		ADAPTED FOR INDEXING
INFO.			NO INDEXING REQUIRED <input checked="" type="checkbox"/>
FROM	Chief of Base, [REDACTED]		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	ISOLOG/ADMIN [REDACTED] -Life Insurance Coverage		
ACTION REQUIRED - REFERENCES			
<p>Reference: USFT-1303 dated 29 February 1968 <i>hnc</i></p> <p>Forwarded under separate cover is a memorandum from [REDACTED] requesting cancellation as of 3 May 1969 of the \$10,000 optional life insurance coverage under FEGLI which he elected to take in 1968 per the reference. Please forward the memorandum to the Insurance Branch for appropriate action.</p> <p>[REDACTED]</p> <p>Originated by [REDACTED]</p> <p>Attachment: Memorandum a/s/a, 2 copies USC</p> <p>Distribution: 2 - Chief, DO w/attachment</p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
	USFT-1477	4 April 1969	
	CLASSIFICATION SECRET	WOS FILE NUMBER	

4 April 1969

MEMORANDUM

TO :
FROM : James A. Noel
SUBJECT : \$10,000 Optional Insurance

This memorandum is authorization to cancel the \$10,000 additional optional life insurance coverage under the Federal Employees Group Life Insurance Program which I elected to take in February 1968. I request that this cancellation be effective as of 3 May 1969.



James A. Noel

5 August 1968

MEMORANDUM FOR: OF/PAB

SUBJECT :

Career Agent - Employee No.

Subject converted from Staff Employee to Career Agent status effective 4 August 1968. Attached is his FEOLI application signed in pseudonym.

Virginia C. Lynch
Chief, DO Personnel and Training

Attachment: A/S

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☐
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☐
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STATEMENT" THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

18 July 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

Aug 8 11 25 AM '68
COMPT PERS DIV

See Table of Effective Dates on back of Original.

DUPLICATE COPY—For Agency Use

3

STANDARD FORM No. 176-T
JANUARY 1963
(For use only until April 14, 1968)
176-101

S E C R E T

6 Aug 68

MEMO FOR: The File

SUBJECT: Service
Computation Date

1. On his SF-144 dated 31 July 68 subject claimed following creditable service:

Service	From	To
Dept of State	26 Jan 31	15 Aug 44
OSS/SSS/CIG	16 Aug 44	17 Sep 47
CIA Staff Employee	18 Sep 47	3 Aug 68
CIA Career Agent	4 Aug 68	date

2. Subject has had continuous service from 26 Jan 1931. Accordingly, this date was set as subject's SCD. Review of subject Staff Employee file this date ~~found~~ found that the Staff Employee file also cited subject's SCD as being 26 Jan 1931.

Paul Wilson

11/5/71

S E C R E T

SECRET

31 July 1968

MEMORANDUM FOR: Chief, Insurance Branch/BSD/OP

This is to advise you that [redacted] has been employed under an Agency personal services contract effective 4 August 1968. The contract authorizes participation in Civil Service Retirement, FEGLI and Federal Health Insurance.

Subject's contract is the administrative responsibility of CCP/DO.

Dow H. Luetscher
Chief
Contract Personnel Division

SECRET

Group 1
Excluded from automatic
downgrading and
declassification

00000

[Redacted]

Dear [Redacted]

The United States Government, as represented by the Contracting Officer, hereby contracts with you for your services as a Career Agent under the following terms and conditions:

1. Status. Your status is that of a Government employee under contract and, as such, your rights and benefits are governed by the provisions of this agreement. It is specifically understood that you are not entitled to rights and benefits pertaining to appointed staff status, except as provided herein.

[Redacted]

3. Compensation. For your services as a Career Agent, you will be compensated at a basic salary of \$26,640 per annum, the equivalent of a GS-16/6. In addition you will be entitled to legislative pay adjustments and within grade promotions in substantial conformance with rules and regulations applicable to Government appointed employees.

4. Funding. If necessary to protect the security of this arrangement, monies due you hereunder may be funded in other than a direct manner. It is understood and agreed that any monies so funded constitute payment by the Government in satisfaction of its obligations under this agreement.

5. Taxes. As a Career Agent, monies paid you under paragraph three (3) above constitute taxable income for Federal tax purposes and you must satisfy your Federal tax liability thereon. Such income may be paid you by or through a cover facility. Because of cover, operational, and security considerations the Tax Committee of this organization is authorized to make certain determinations and establish procedures (including tax withholdings) which will result in the full satisfaction of your Federal income and Social Security tax obligations. It is specifically understood and agreed that such determinations and procedures, whether oral or written, constitute an integral part of this contract and are legally incorporated herein by reference.

SECRET

[Redacted]

6. Travel. You will be advanced or reimbursed funds for necessary expenses incurred in connection with such operational travel as may be directed or authorized by this organization. This may include per diem in lieu of subsistence in the course of such travel and while on temporary duty away from your post of assignment. All travel, transportation and per diem provided for under this paragraph must be properly authorized, and expenses incurred hereunder are subject to payment and accounting in compliance with applicable Government regulations, or according to the established policies of your cover facility, whichever is directed by the Government.

7. Operational Expenses. You will be advanced or reimbursed funds for necessary operational expenses including, but not limited to, entertainment and the purchase of information, as specifically approved by the Government or your cover facility. Such funds will be subject to payment and accounting in substantial compliance with applicable Government regulations or according to the established policies of your cover facility, whichever is directed by the Government.

8. Repayment. It is recognized that your failure to account for or refund any monies advanced you hereunder shall entitle the Government to withhold the total amount of such indebtedness or any portion thereof from any monies due you under the terms of this contract in such manner as it deems appropriate.

9. Benefits. By virtue of your employment relationship with the Government hereunder, you are herein authorized:

(a) Coverage under the Federal Employees' Compensation Act, as amended. Claims by you, your heirs or legal representatives under this Act will be processed by this organization in accordance with its procedures in such manner as not to impair security.

(b) Continued participation in the Civil Service Retirement System in conformance with rules and regulations applicable to appointed employees of this organization. From the basic compensation paid you hereunder there shall be deducted the appropriate rate percentage (presently 6-1/2%) for deposit and eventual crediting to the Civil Service Retirement Fund. Social Security deductions required by virtue of your cover activities will not be reimbursed you by this organization.

(c) Continuation of your present coverage under the Federal Employees' Health Benefits Act. This organization is presently authorized to bear a portion of the premium cost, you will bear the remainder. Your financial contribution will be effected either by payroll deduction or by direct remittance at periodic intervals to be established by this organization.

SECRET



00000

(d) Continued coverage under the Federal Employees' Group Life Insurance Act unless you have previously executed a written waiver of said coverage. This organization is presently authorized to bear a portion of the premium cost, you will bear the remainder. Your financial contribution will be effected either by payroll deduction or by direct remittance at periodic intervals to be established by this organization.

(e) Sick and annual leave equal to and subject to the same rules and regulations applicable to Government appointed employees. Annual leave may only be taken at times and places approved in advance by appropriate Government representatives. All accrued but unused leave credited to your former account as an appointed employee of this organization will be transferred to the leave account established for you under this agreement.

10. Offset. Emoluments (including benefits in kind) received from or through your cover activities are the property of the U. S. Government. Procedurally, such emoluments will be offset against amounts due you under this agreement and are acknowledged to be payment by the Government hereunder and for Federal income tax purposes. You will render signed reports to this organization, every six (6) months, indicating all cover emoluments received during the reporting period. Negative reports covering the same period will be submitted if no cover emoluments are received. Failure to submit timely reports may result in suspension of any contractual payments due you hereunder. If cover emoluments exceed those due you under this contract, you will dispose of the excess amount in conformance with Governmental instructions.

11. Execution of Documents. If, in the performance of services under this contract, you assume the custody of Government funds or take title of record to property of any nature whatsoever and wherever situate, which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by the Government to evidence this relationship.

12. Secrecy. (a) You will be required to keep forever secret this contract and all classified information which you may obtain by reason hereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the espionage laws of the United States and other applicable laws and regulations.

(b) In the event you marry or remarry during the term of this contract, you agree to advise this organization at least one hundred twenty (120) days in advance of such contemplated marriage, or otherwise as soon as known, and to furnish such personal history data on your prospective spouse as may be required by this organization. You understand and agree that should this organization determine that your marriage would limit or otherwise impair your usefulness to the Government, this contract may be terminated.

SECRET

13. Instructions. Instructions received by you from the Government in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

14. Reassignments. During your period of service under this agreement, it may be necessary for this organization to terminate an assignment for reasons beyond your control. In such event, you will be given every consideration for other assignments appropriate to Career Agents.

15. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government. Specifically, you herein acknowledge that this organization makes no commitment, either express or implied, that appointed employment status will be offered you at the conclusion of or during your period of contractual service.

16. Term. This contract is effective as of 4 Aug 68, and shall continue thereafter until your retirement from the organization upon reaching age sixty (60) unless sooner terminated:

(a) Upon ninety (90) days' actual notice by either party hereto, or

(b) Upon actual notice to you in the event the results of an initially required medical examination are determined by this organization to be unsatisfactory, or

(c) Without prior notice by the Government, in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY _____
Contracting Officer

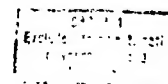
ACCEPTED:

Cecil J. Klobukar

WITNESS: _____

APPROVED: _____

Handwritten signatures and initials:
JLW
EJ/ J.W.
20 Aug 68



SECRET

19 July 1968

MEMORANDUM FOR: Chief, CSPA

ATTENTION: Chief, Agent Branch

SUBJECT: Conversion to Career Agent Status
James A. Noel - GS-16

1. Transmitted herewith are the following documents in connection with subject's conversion to Career Agent status:

Contract Check List (3)

Biographic Profile (9)

Latest Fitness Report (9)

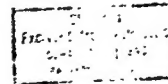
2. The Request [redacted] form has been sent to Chief, Central Cover Staff for consideration. Action is being held up pending subject's TDY at headquarters, on or about 29 July 1968. Appropriate modifications will be worked out with CCS at that time.

3. Subject will convert at his current salary, GS-16/6 and will be assigned to the San Francisco area, [redacted] engaged in spotting, assessing, recruiting and handling agents. The effective date of his contract will be determined following discussions with Mr. Noel during his TDY.

W. T. Montgomery
W. T. MONTGOMERY
Chief, DO Support Group

Attachments:
as stated above

SECRET



Complete all items, inserting "NA" when item is not applicable. Forward original and 100 copies for preparation of contract.		11- 096		10 March 68	
SECTION I GENERAL					
1. NAME <input checked="" type="checkbox"/> PSEUDO <input type="checkbox"/> TRUE		3. ALLOTMENT NO.		4. SLOT NO.	
<div style="border: 1px solid black; width: 150px; height: 60px; margin: 5px;"></div>		20. PERMANENT STATION San Francisco, Calif.		3A. FUNDS <input checked="" type="checkbox"/> V <input type="checkbox"/> W	
		6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) \$24,477.00 (GS-16 step 6) Staff from Sept. 1967 to present XXXXXXXXXXXXXXXXXXXX			
7. SECURITY CLEARANCE (Type and date) Conv. app. 3 Apr 67		7A. MEDICAL CLEARANCE <input checked="" type="checkbox"/> OBTAINED <input type="checkbox"/> INITIATED <input type="checkbox"/> NOT REQ'D.		8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) CAREER AGENT			
SECTION II PERSONAL DATA					
11. CITIZENSHIP USA		12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO		13. AGE	
14. DATE OF BIRTH (Month, day, year)					
15. LEGAL RESIDENCE (City and state or country)		16. CURRENT RESIDENCE (City and state or country) Calif.			
17. MARITAL STATUS (Check as appropriate). <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED					
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: Wife Son Son		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input type="checkbox"/> NO RELATIONSHIP:			
SECTION III U.S. MILITARY STATUS					
20. RESERVE		21. VETERAN		22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
23. BRANCH OF SERVICE		24. RANK OR GRADE		25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input type="checkbox"/> NO	
				26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input type="checkbox"/> NO	
SECTION IV COMPENSATION					
27. BASIC SALARY \$26,640* XXXXXXXXXXXXXXXXXXXX \$26,640.00 (GS-16 step 6)		28. POST DIFFERENTIAL		29. COVER (Breakdown, if any)	
				30. FEDERAL TAX WITHHOLDING	
				COVER CIA	
				YES YES	
				NO NO	
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)					
31. QUARTERS		32. POST		33. OTHER	
34. COVER (Breakdown, if any)					
SECTION VI TRAVEL					
35. TYPES <input type="checkbox"/> PCS <input checked="" type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL				36. WITH DEPENDENTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
37. HME TO BE SHIPPED		37A. HME TO BE STORED		38. PERSONAL VEHICLE TO BE SHIPPED	
YES NO		YES NO		YES NO	
				39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL	
				YES NO	
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH *Salary includes IPI - 14 July 1968 <i>Compensation appears way below line for type position, \$26,640</i> 1968					
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES					
SECTION VII OPERATIONAL EXPENSES					
2. PURCHASE OF INFORMATION		43. ENTERTAINMENT		44. OTHER	
yes		yes		as authorized	
5. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES					

CONTRACT INFORMATION AND CHECK LIST (CONTINUED)

Laurens H. Montgomery

TELEPHONE EXTENSION

11-6 042

DATE

10 March 1955

NOTE: SEE INSTRUCTIONS ON FIRST SHEET

SECTION VIII

OTHER BENEFITS

46. BENEFITS (See H 20-615, H 20-620, H 20-670, H 20-1000, and HB 20-620-1, HB 20-1000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)

ALL CAREER AGENT BENEFITS

SECTION IX

COVER ACTIVITY

47. STATUS (Check) ☐ PROPOSED ☐ ESTABLISHED 48. TYPE (Check) ☐ PROPRIETARY ☐ SUBSIDIZED ☐ CULTURAL ☐ EDUCATIONAL ☐ COMMERCIAL ☐ MILITARY ☐ TOURIST ☐ OTHER

49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS

☐ YES ☒ NO ☐ COMPLETE ☐ PARTIAL

SECTION X

OFFSET OF INCOME

50. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.) ☐ TOTAL ☐ PARTIAL ☐ NONE

SECTION XI

TERM

51. DURATION ☐ DAYS ☐ MONTHS ☐ YEARS 52. EFFECTIVE DATE 53. RENEWABLE ☐ YES ☒ NO

54. TERMINATION NOTICE (Number of days)

90 days

55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION

☐ YES ☒ NO

SECTION XII

FUNCTION

56. PRIMARY FUNCTION (CI, PI, PP, other)

FI

SECTION XIII

DUTIES

57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED

Spotting, assessing, recruitment and handling of agents in San Francisco.

SECTION XIV

QUALIFICATIONS

58. EXPERIENCE

Staff

59. EDUCATION

(Check Highest Level Attained)

☐ GRADE SCHOOL ☒ HIGH SCHOOL GRADUATE ☐ TRADE SCHOOL GRADUATE

☐ BUSINESS SCHOOL GRADUATE ☐ COMMERCIAL SCHOOL GRADUATE

☐ COLLEGE (No degree)

☐ COLLEGE DEGREE

☐ POST GRADUATE

MA

PHD

60. LANGUAGE COMPETENCY

LANGUAGE

SPEAK

WRITE

READ

61. INDIVIDUAL'S COUNTRY OF ORIGIN

(Check Appropriate Degree Competency)

Spanish

FLUENT

AVERAGE

POOR

FLUENT

AVERAGE

POOR

FLUENT

AVERAGE

POOR

FLUENT

AVERAGE

POOR

62. AREA KNOWLEDGE

SECTION XV

EMPLOYMENT PRIOR TO CIA

63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING

1931-36 State Dept., Mexico - Vice-Consul (Ensenada)
1938-41 " " " " (Mazatlan)
1941-44 " " " " (Guadalajara)
1944-47 OCS/SSU/CIC, Spain and Guatemala - Chief of Station

SECTION XVI

ADDITIONAL INFORMATION

64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)

☐ OVER

APPROVAL

ATE

TYPED NAME & SIGNATURE OF REQUESTING OPERATING OFFICIAL

Virginia C. Lynch, C/DO/Pers & Trng

DATE

TYPED NAME & SIGNATURE OF CONTRACT APPROVING OFFICER

W. T. MONTGOMERY, C/DO/SG

SECRET